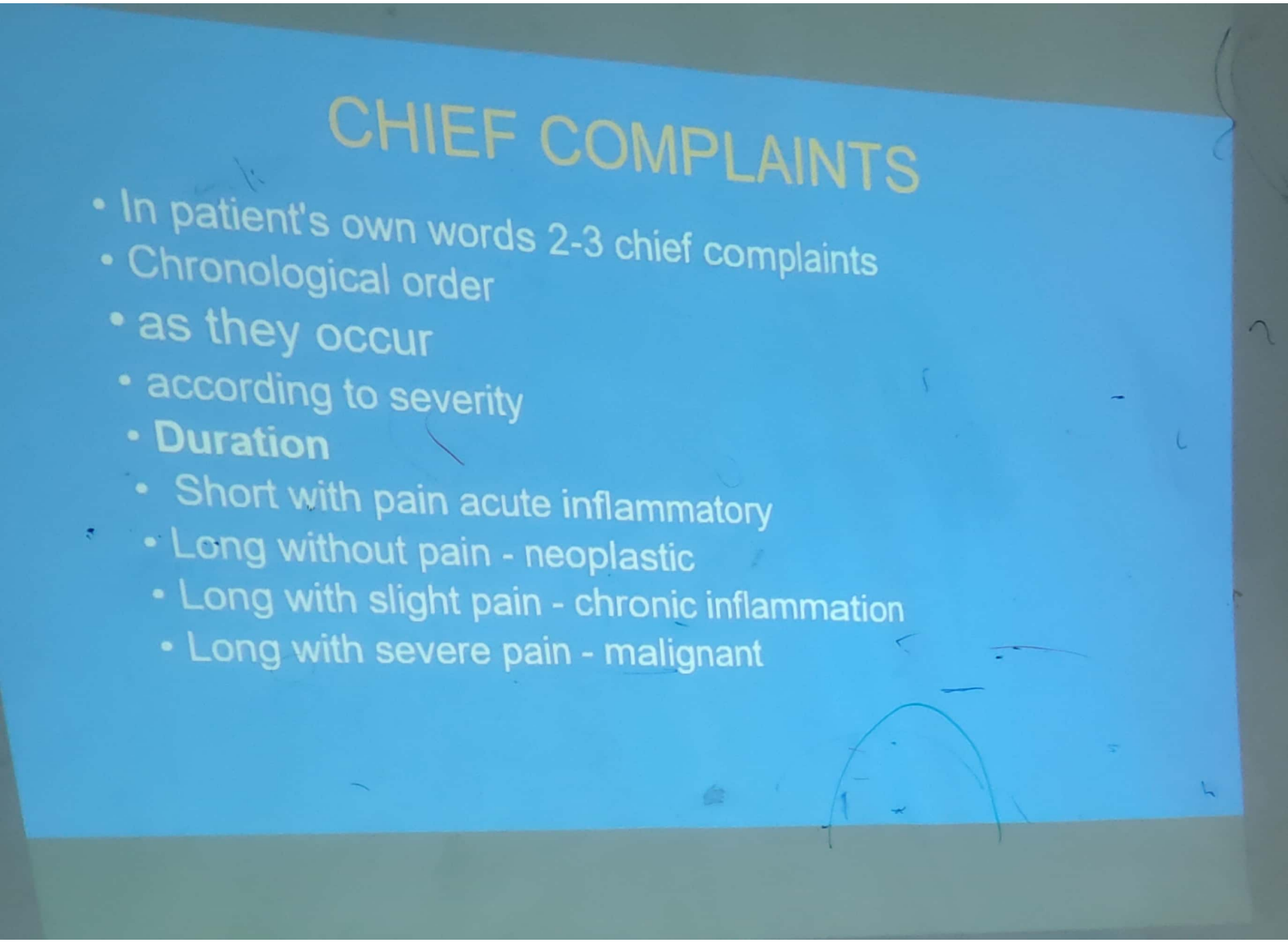
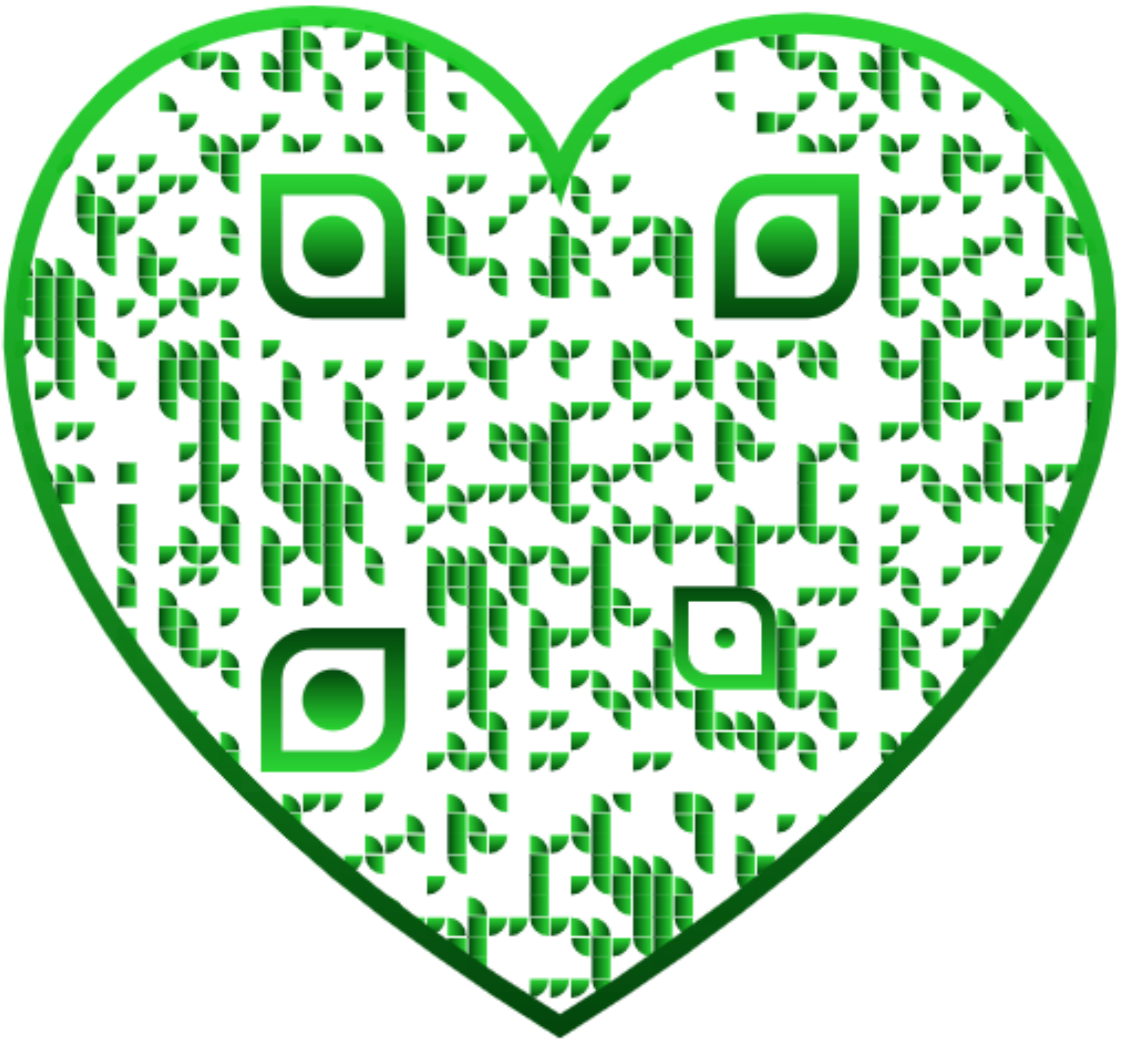

CHIEF COMPLAINTS
• In patient's own words 2-3 chief complaints
• Chronological order
• as they occur
• according to severity
• Duration
• Short with pain acute inflammatory
• Long without pain - neoplastic
• Long with slight pain - chronic inflammation
• Long with severe pain - malignant

Scanned by CamScanner



OTALGIA

Pain in and around the ear

- Etiology
- Primary otalgia - local causes - inflammation, trauma, neoplasm affecting external and middle ear,(inner ear : no pain)

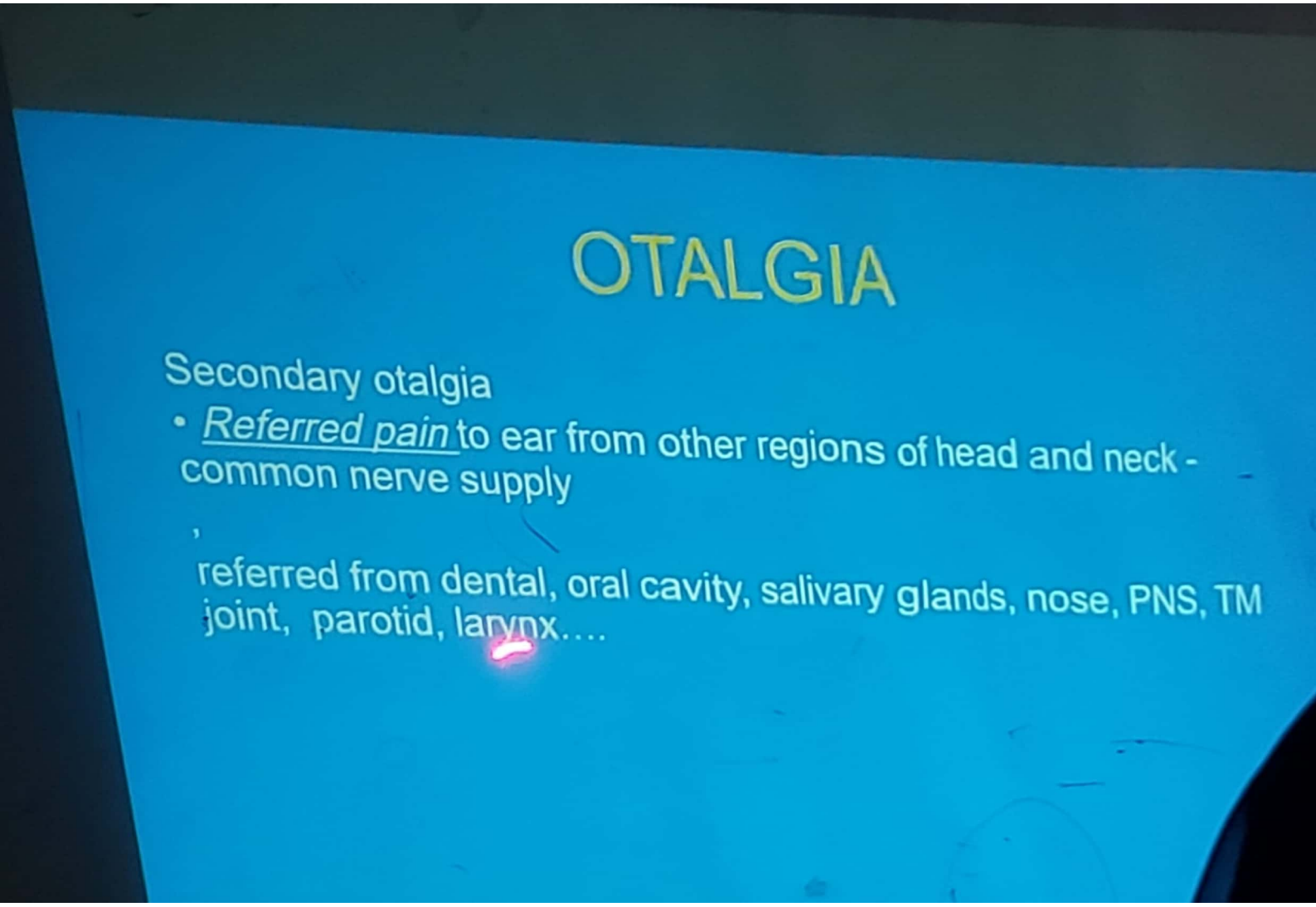
Auricle - perichondritis, trauma

- EAC - furuncle, impacted wax, acute otitis externa, FB, otomycosis, neoplasm, myringitis
- Middle ear - ASOM, mastoiditis, ET obstruction

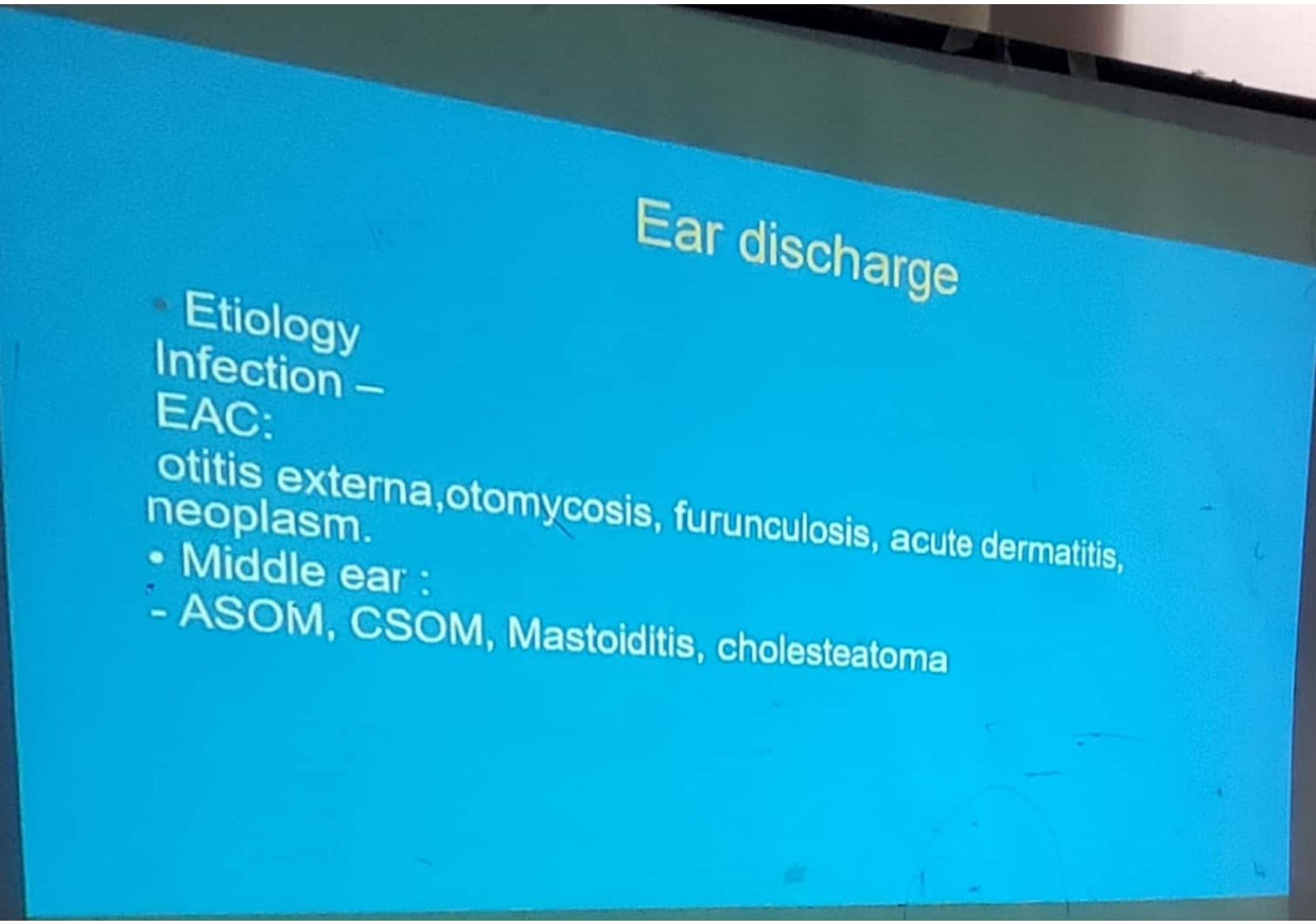
CSOM-(no pain unless intra cranial complications)

Barotrauma- due to flying or scuba diving

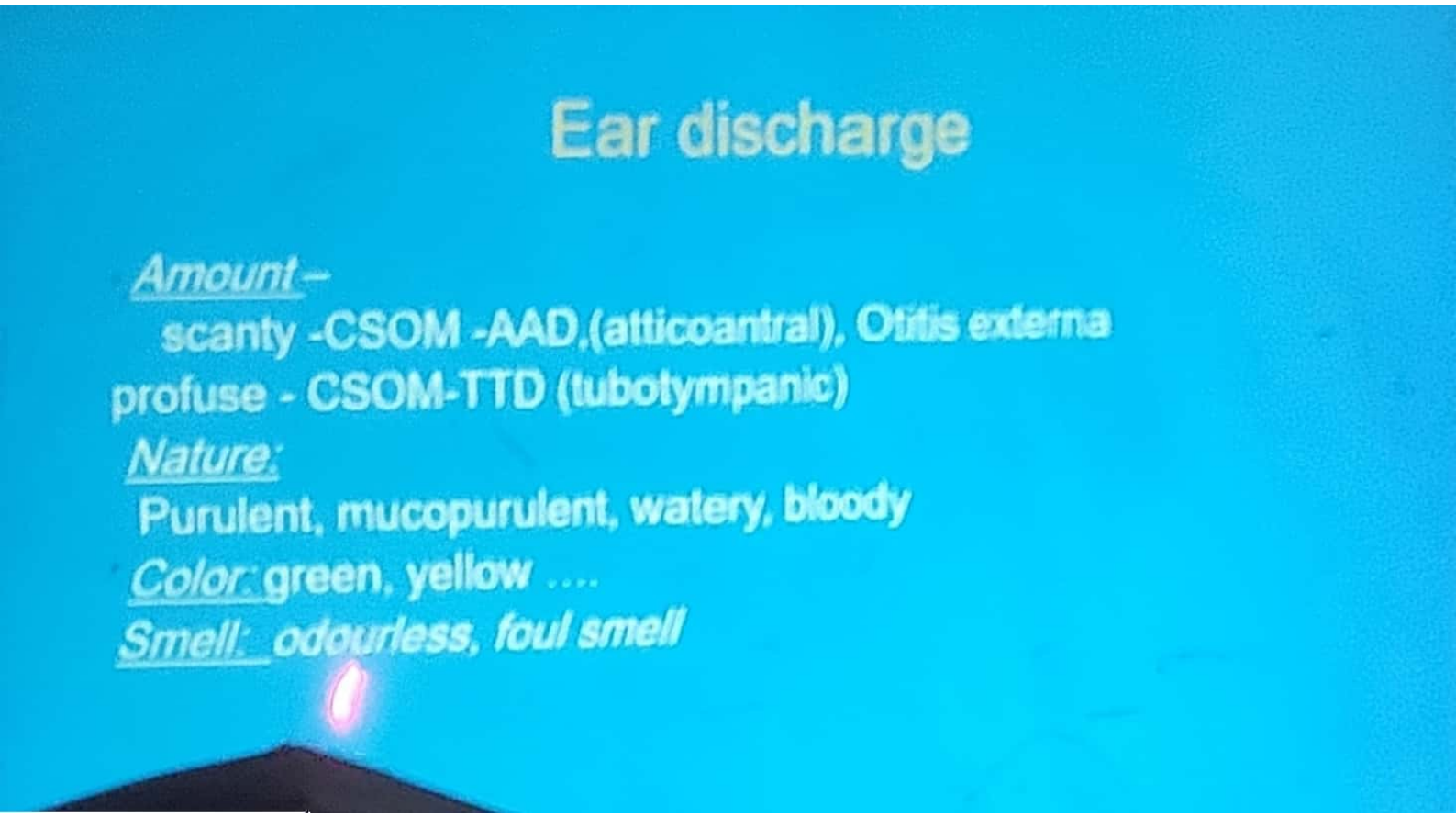
Scanned by CamScanner


OTALGIA
Secondary otalgia
• Referred pain to ear from other regions of head and neck - common nerve supply
referred from dental, oral cavity, salivary glands, nose, PNS, TM joint, parotid, larynx….

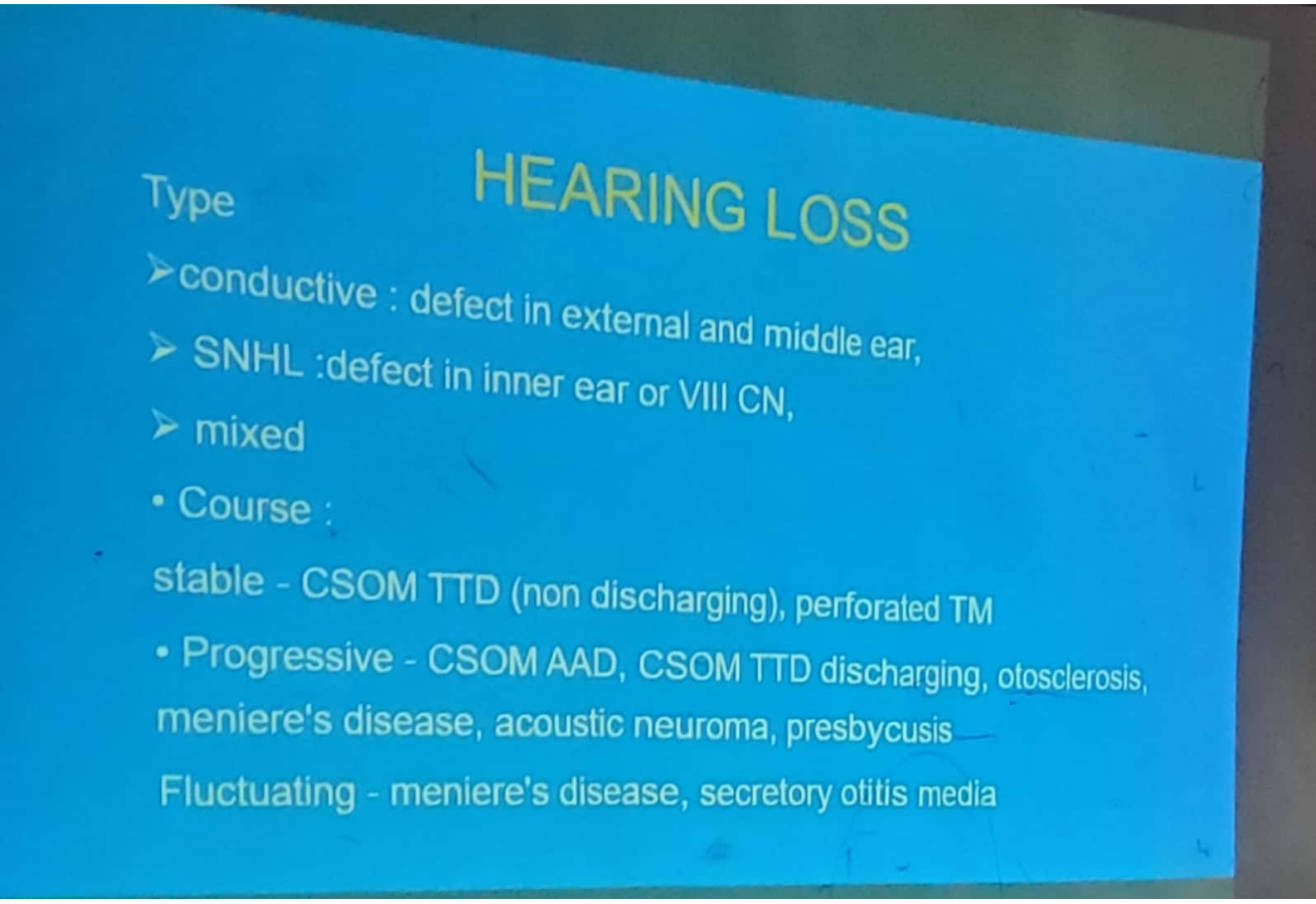
Scanned by CamScanner



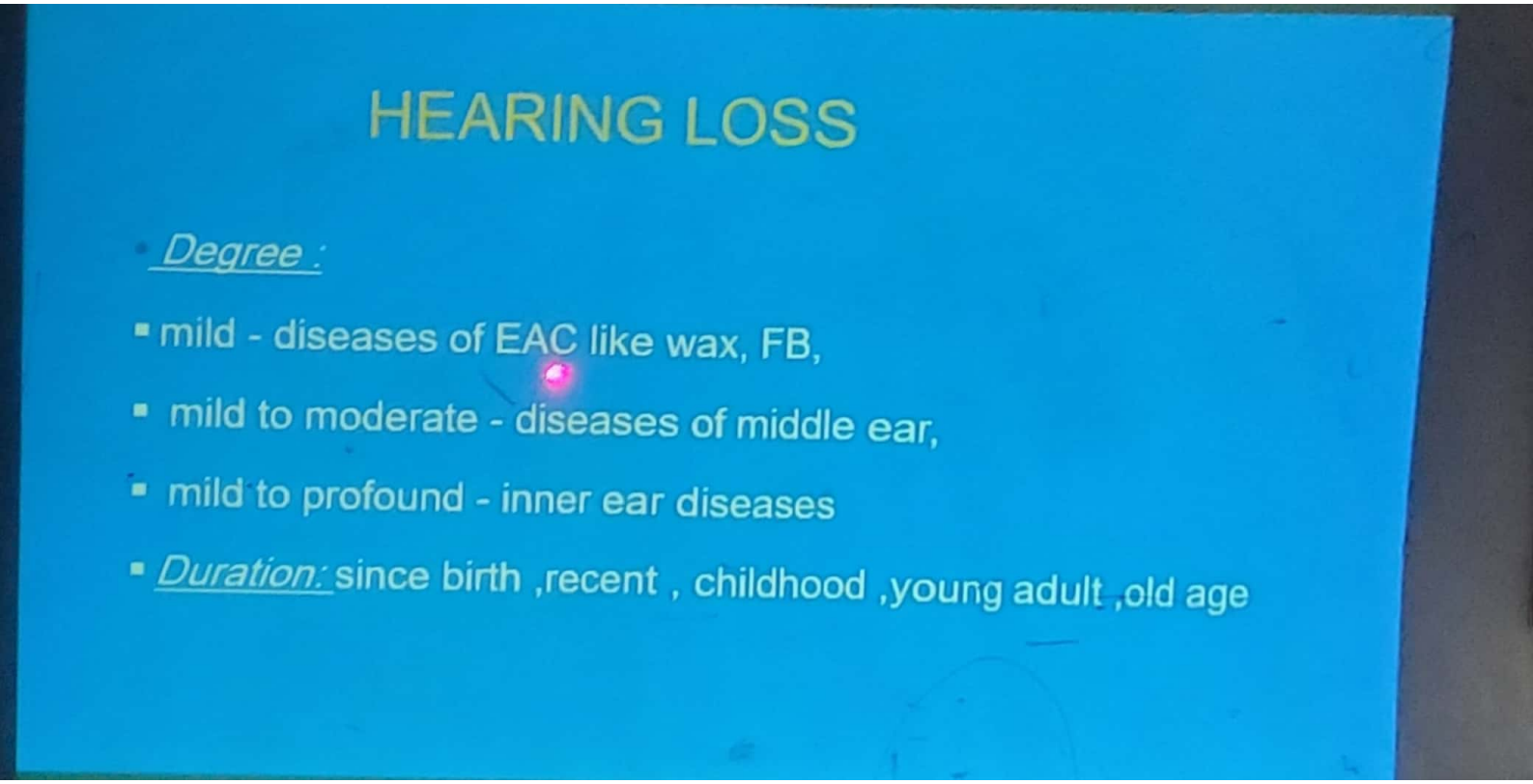
Scanned by CamScanner



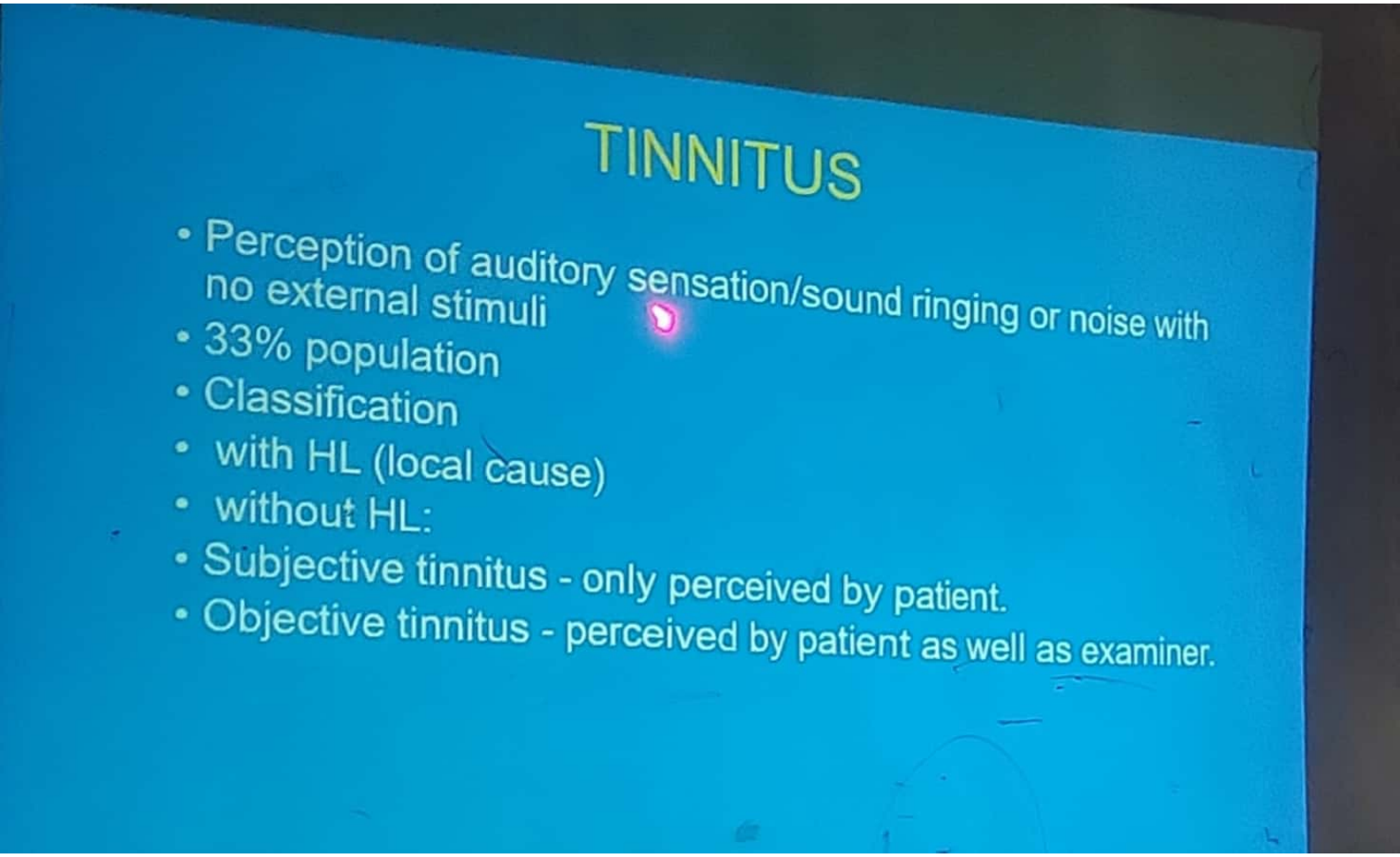
Scanned by CamScanner


HEARING LOSS
Type
conductive : defect in external and middle ear,
SNHL :defect in inner ear or VIII CN,
mixed
• Course :
stable - CSOM TTD (non discharging), perforated TM
• Progressive - CSOM AAD, CSOM TTD discharging, otosclerosis, meniere's disease, acoustic neuroma, presbycusis
Fluctuating - meniere's disease, secretory otitis media

Scanned by CamScanner


HEARING LOSS
Degree :
mild - diseases of EAC like wax, FB,
mild to moderate - diseases of middle ear,
mild to profound - inner ear diseases
Duration: since birth ,recent , childhood ,young adult ,old age

Scanned by CamScanner

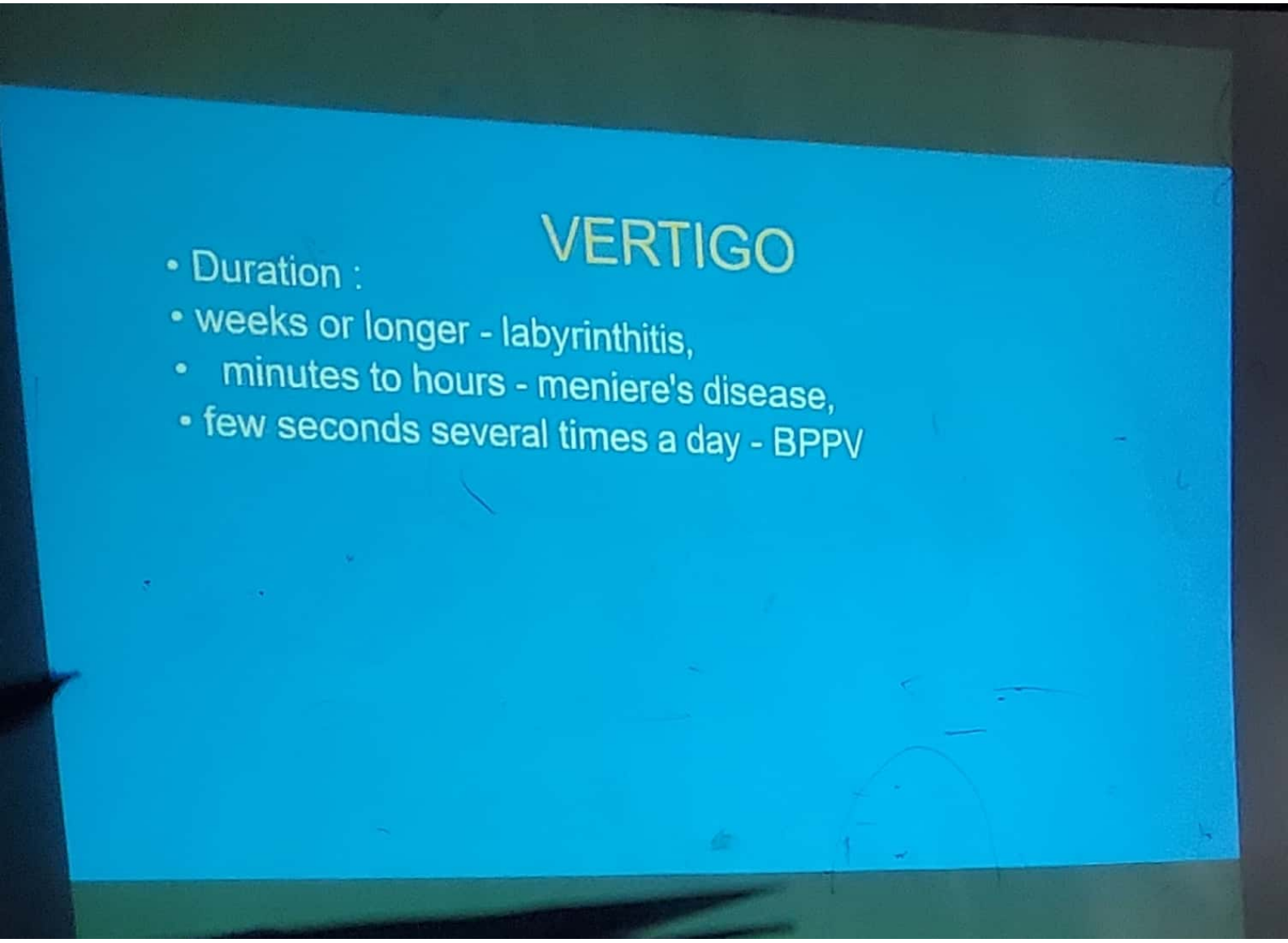

TINNITUS
• Perception of auditory sensation/sound ringing or noise with no external stimuli
• 33% population
• Classification
• with HL (local cause)
• without HL:
• Subjective tinnitus - only perceived by patient.
• Objective tinnitus - perceived by patient as well as examiner.

Scanned by CamScanner

VERTIGO

- Sensation of rotation of surrounding environment with respect to person or person with respect to surrounding.
- Associated with LOC central cause,
- not associated - peripheral cause - inner ear
- Associated with loss of hearing - labyrinthitis, meniere's disease, acoustic neuroma (U/L)
- Associated with discharging ear - labyrinthitis secondary to ASOM, CSOM
- Sudden onset - ear pathology
- Associated with posture - BPPV
- Associated with URTI - viral labyrinthitis, Vestibular neuritis

Scanned by CamScanner


VERTIGO
• Duration :
• weeks or longer - labyrinthitis,
• minutes to hours - meniere's disease,
• few seconds several times a day - BPPV

Scanned by CamScanner

ITCHING IN EAR

- Fungal infection – otomycosis
- Allergy
- Wax
- Dermatitis

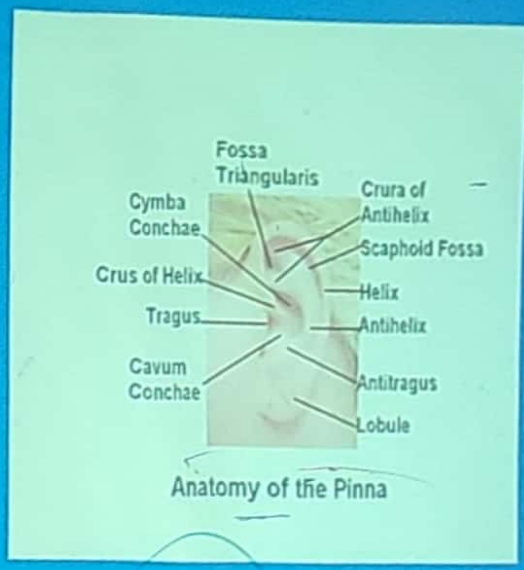
BLOCKED EAR/ EAR FULLNESS

- Wax/ FB
- ET blockage/dysfunction - due to URTI - aggravated on lying down
- Meniere's disease - pressure in ear

Scanned by CamScanner

EAR EXAMINATION

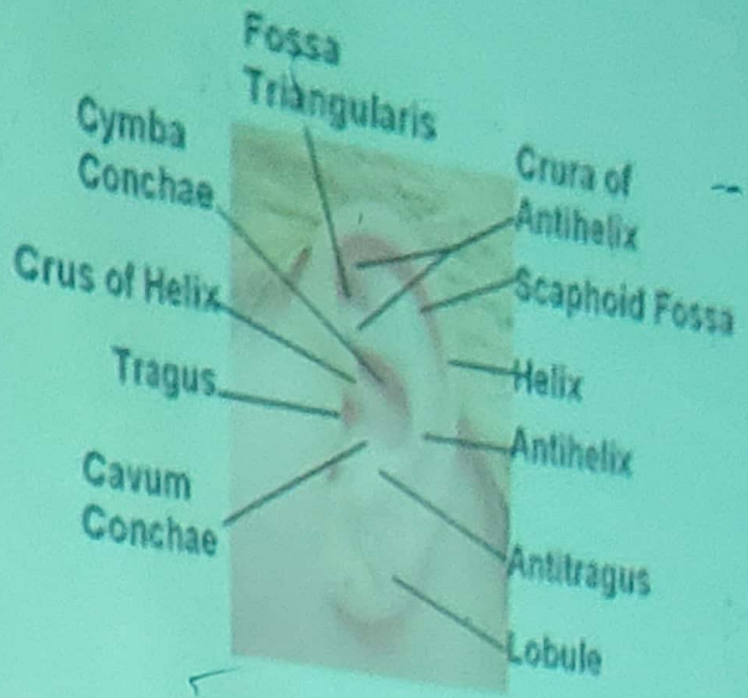
- External Ear
  Auricle/Pinna
  Pre auricular region
  Post auricular/Mastoid region



Anatomy of the Pinna

Scanned by CamScanner

MINATION



Anatomy of the Pinna

Scanned by CamScanner

LOCAL EXAMINATION

Inspection

Palpation

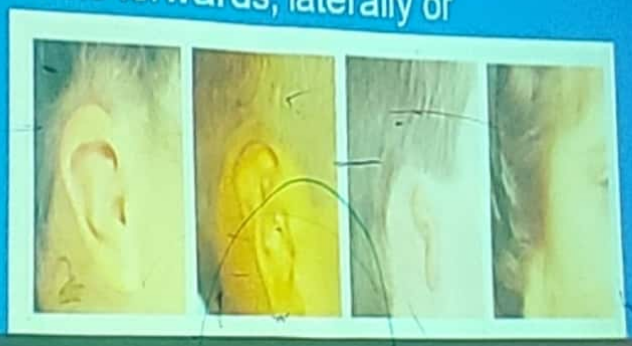
AUSCULTATION

Scanned by CamScanner

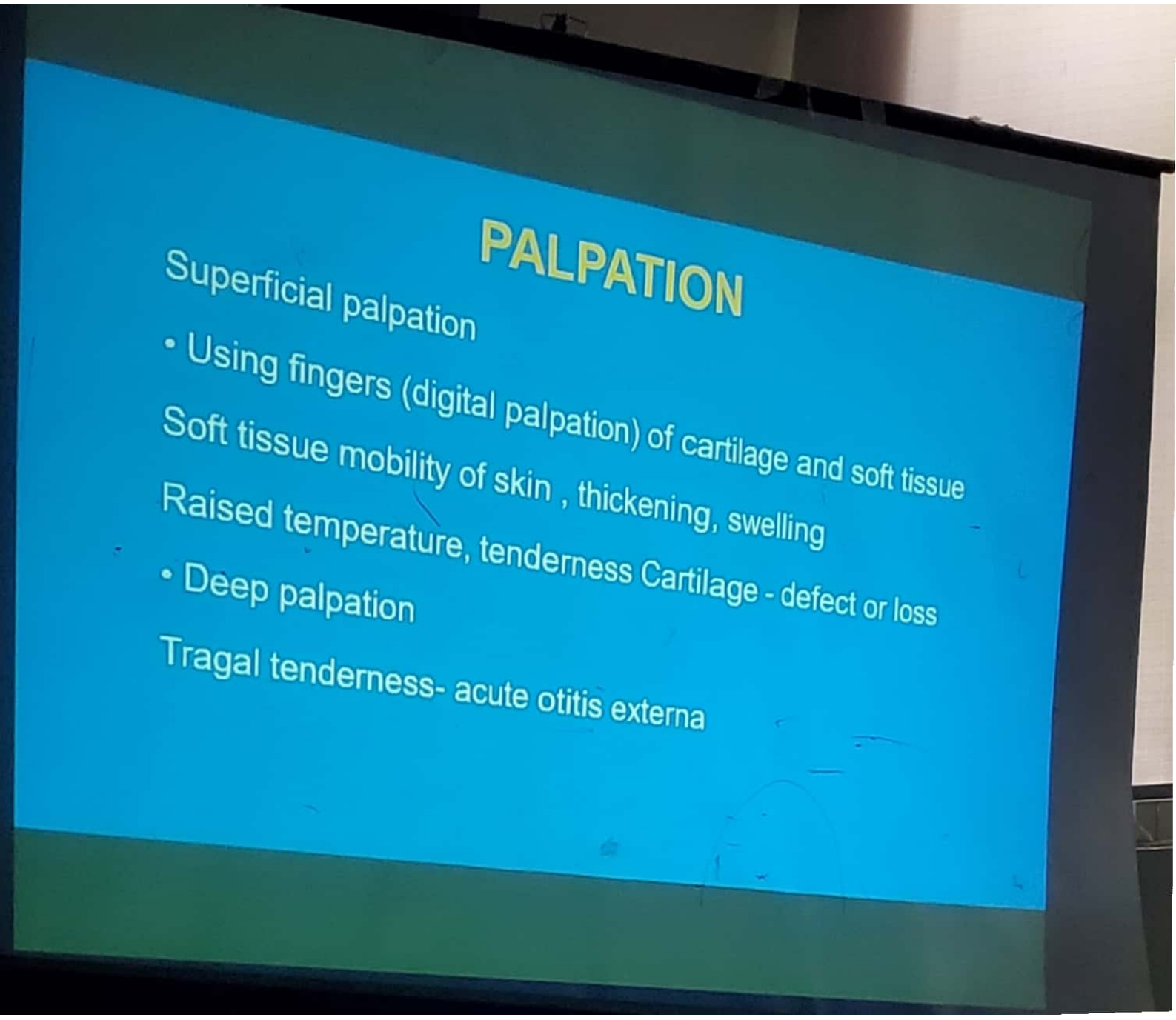
EXTERNAL EAR PINNA/AURICLE

INSPECTION

- Size - anotia (absence), microtia (small)
- Shape - cauliflower ear, bat ear (auricle protrudes anteriorly)
- Colour- red (perichondritis)
- Position- displacement of auricle forwards, laterally or inferiorly(mastoid abscess)
- Swelling
- Scar
- Ulcer



Scanned by CamScanner


PALPATION
Superficial palpation
• Using fingers (digital palpation) of cartilage and soft tissue
Soft tissue mobility of skin , thickening, swelling
Raised temperature, tenderness Cartilage - defect or loss
• Deep palpation
Tragal tenderness- acute otitis externa

Scanned by CamScanner

- Pre auricular region
- Sinus - pre auricular sinus
- Fistula
- Scar
- Swelling cystic, lymphadenitis

Scanned by CamScanner

POST AURICULAR/MASTOID REGION

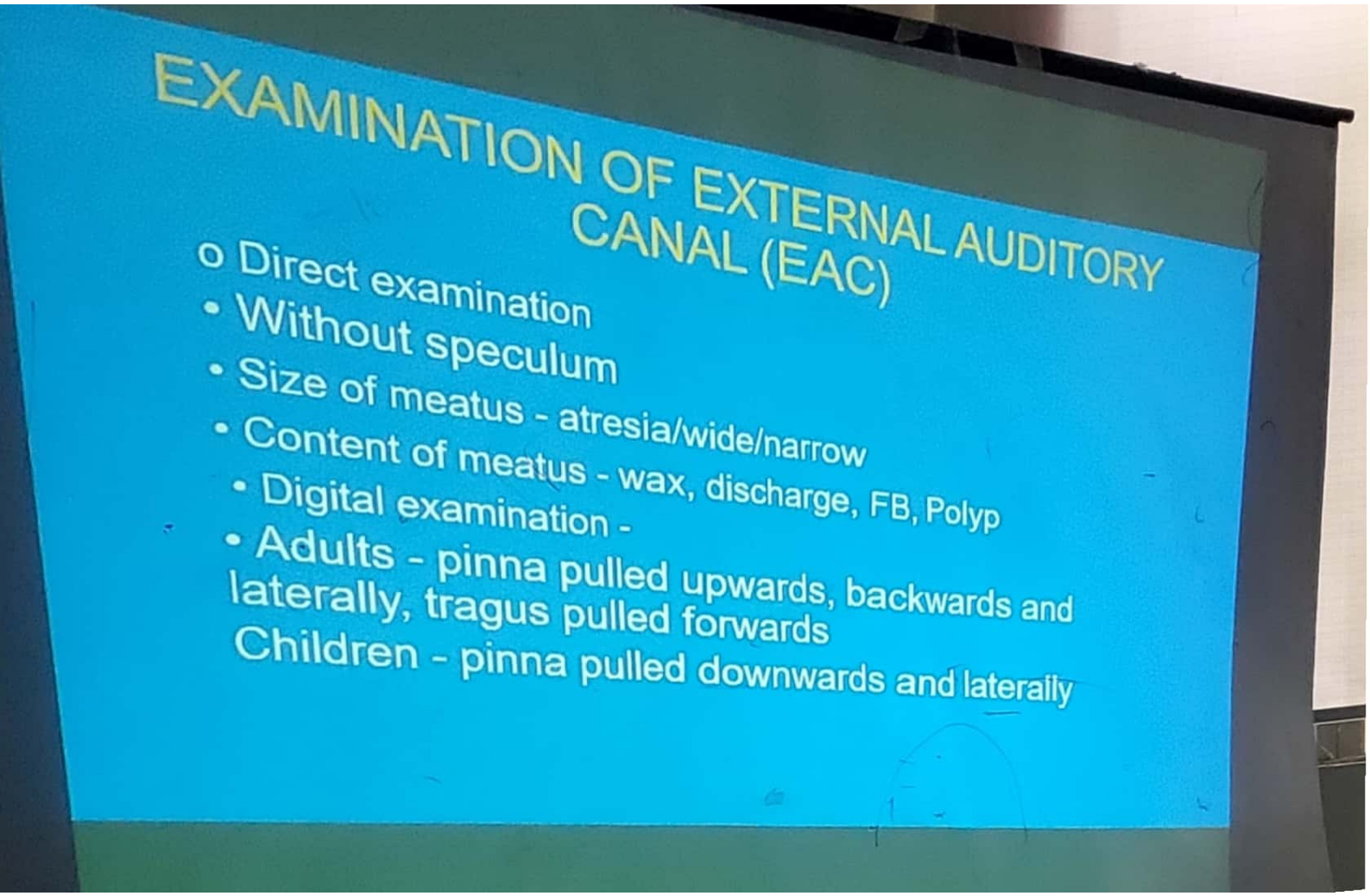
- **INSPECTION**
- Scar, dermatitis, swelling, fistula

- **PALPATION**
- Skin mobility

- Swelling sebaceous cyst (cystic)
- iron out mastoid(mastoiditis).

Tenderness: mastoiditis

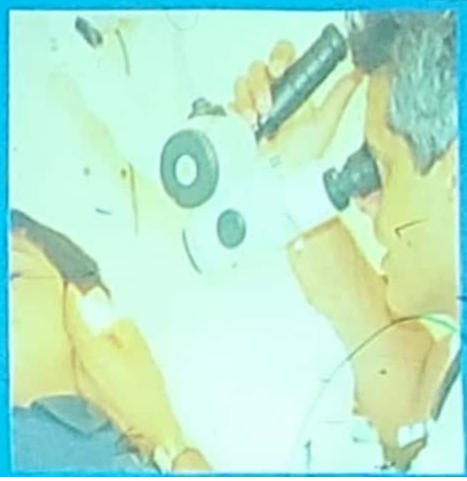
Scanned by CamScanner


EXAMINATION OF EXTERNAL AUDITORY CANAL (EAC)
o Direct examination
• Without speculum
• Size of meatus - atresia/wide/narrow
• Content of meatus - wax, discharge, FB, Polyp
• Digital examination -
• Adults - pinna pulled upwards, backwards and laterally, tragus pulled forwards
Children - pinna pulled downwards and laterally

Scanned by CamScanner

- With speculum examination - deep meatus to straighten the canal

Introduce in slow rotatory fashion upto cartilage only

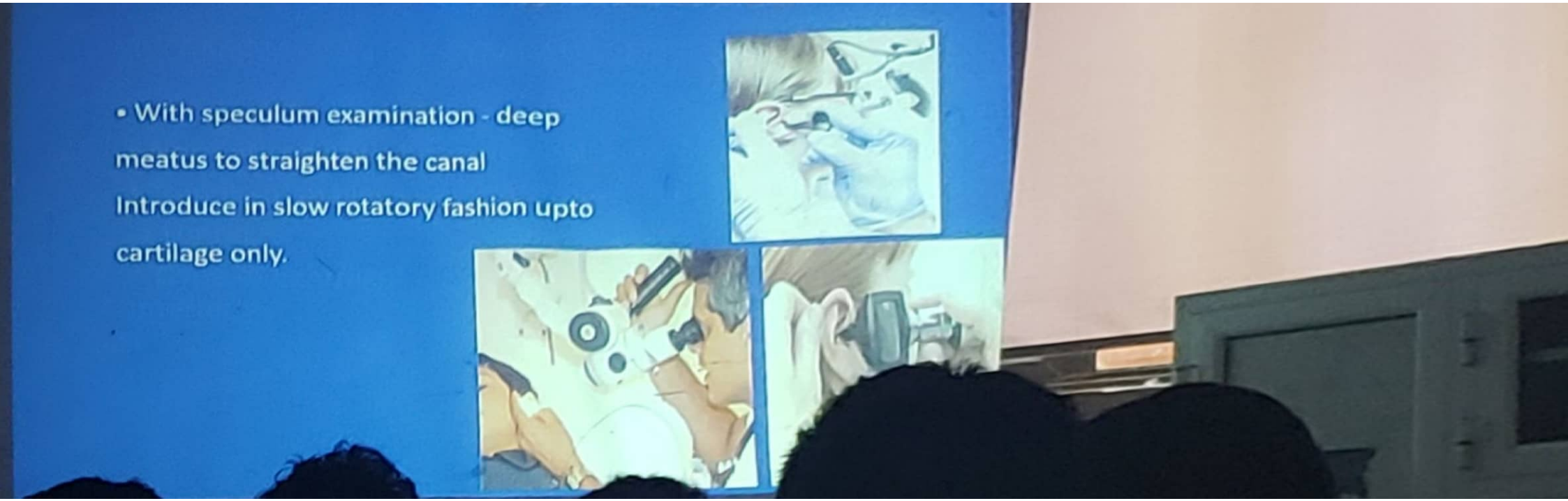


Scanned by CamScanner

EXAMINATION OF TYMPANIC MEMBRANE (TM)

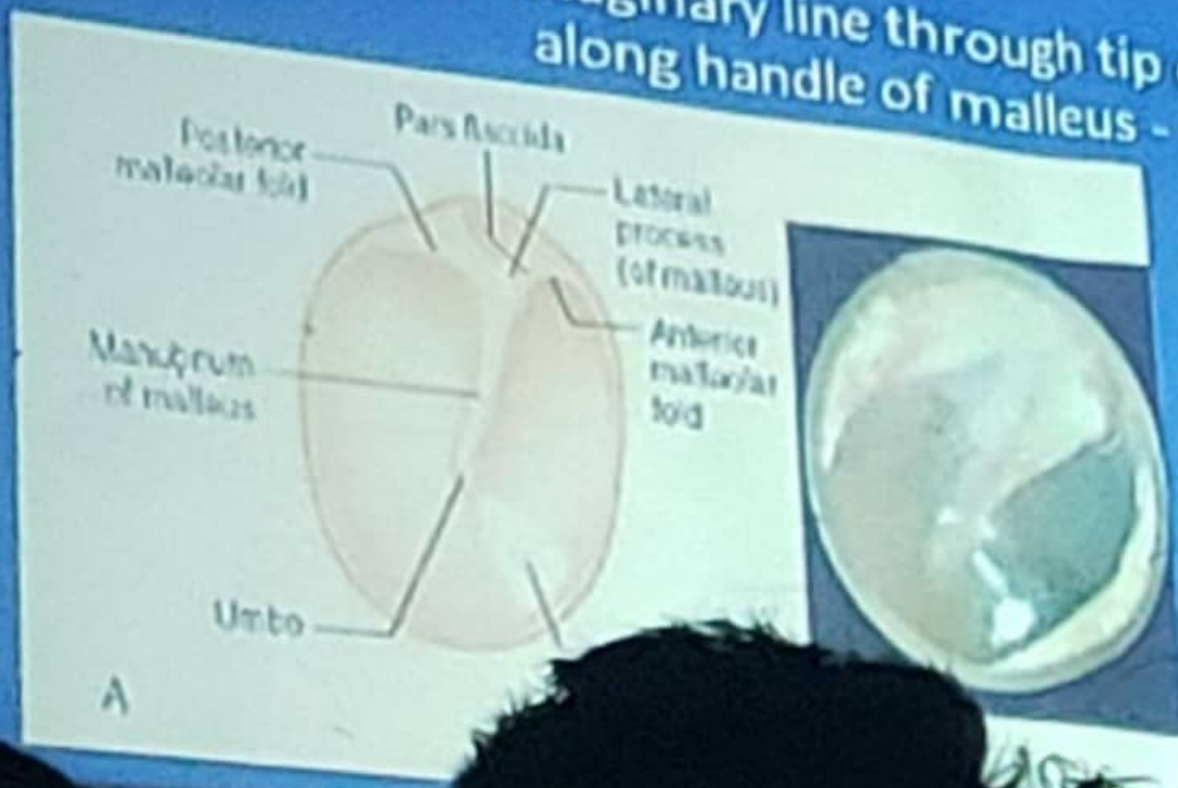
- Normal - pearly white color, obliquely set(55°)
- Handle of malleus - whitish bony landmark
- Umbo
- Cone of light/light reflex - triangular in shape anterior inferiorly
-

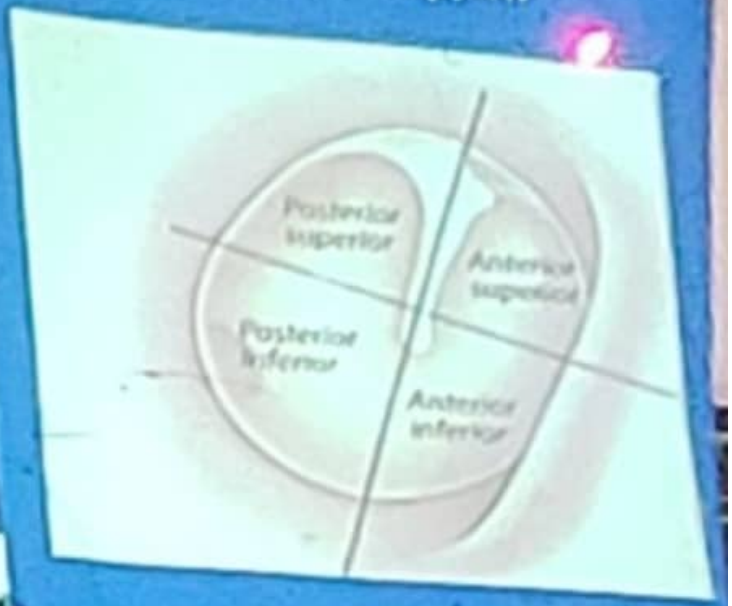
الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner

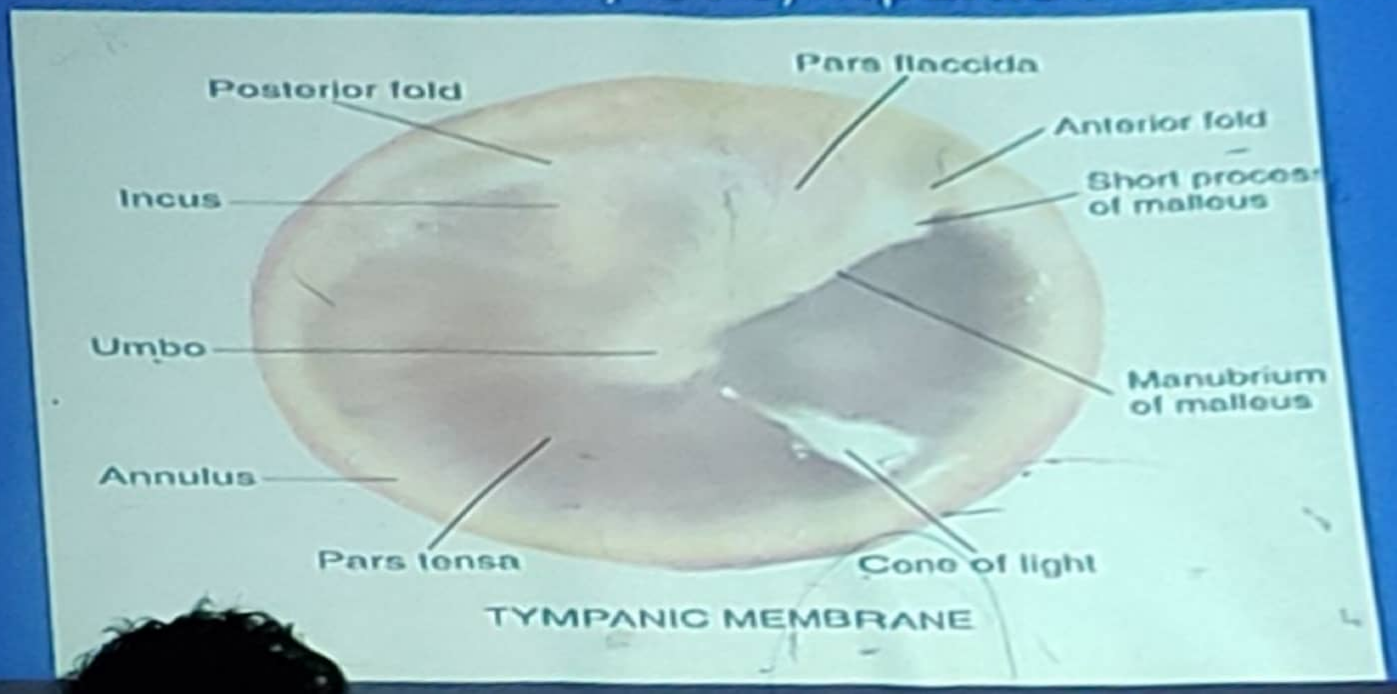
Quadrants (4)- imaginary line through tip of umbo, 2 nd vertically • along handle of malleus - ant sup/inf, post sup/inf





الممسوحة ضوئيا بـ CamScanner

Normal anatomy of tympanic membrane



الممسوحة ضوئيا بـ CamScanner

- Colour: normal colour of TM ?
- red in :ASOM, acute myringitis
- Congestion with yellowish tint : ASOM
- Diffuse congestion: ASOM

  Dull lusterless - secretory otitis media
- Chalky white appearance : tympanosclerosis
- Dark blue drum [redacted]ympanum

الممسوحة ضوئيا بـ CamScanner

Q

Describe the findings.

List 5 differential diagnosis ?

الممسوحة ضوئيا بـ CamScanner

Describe the findings &

diagnosis

Enumerate 3 causes for it

Give 2 symptoms

الممسوحة ضوئيا بـ CamScanner

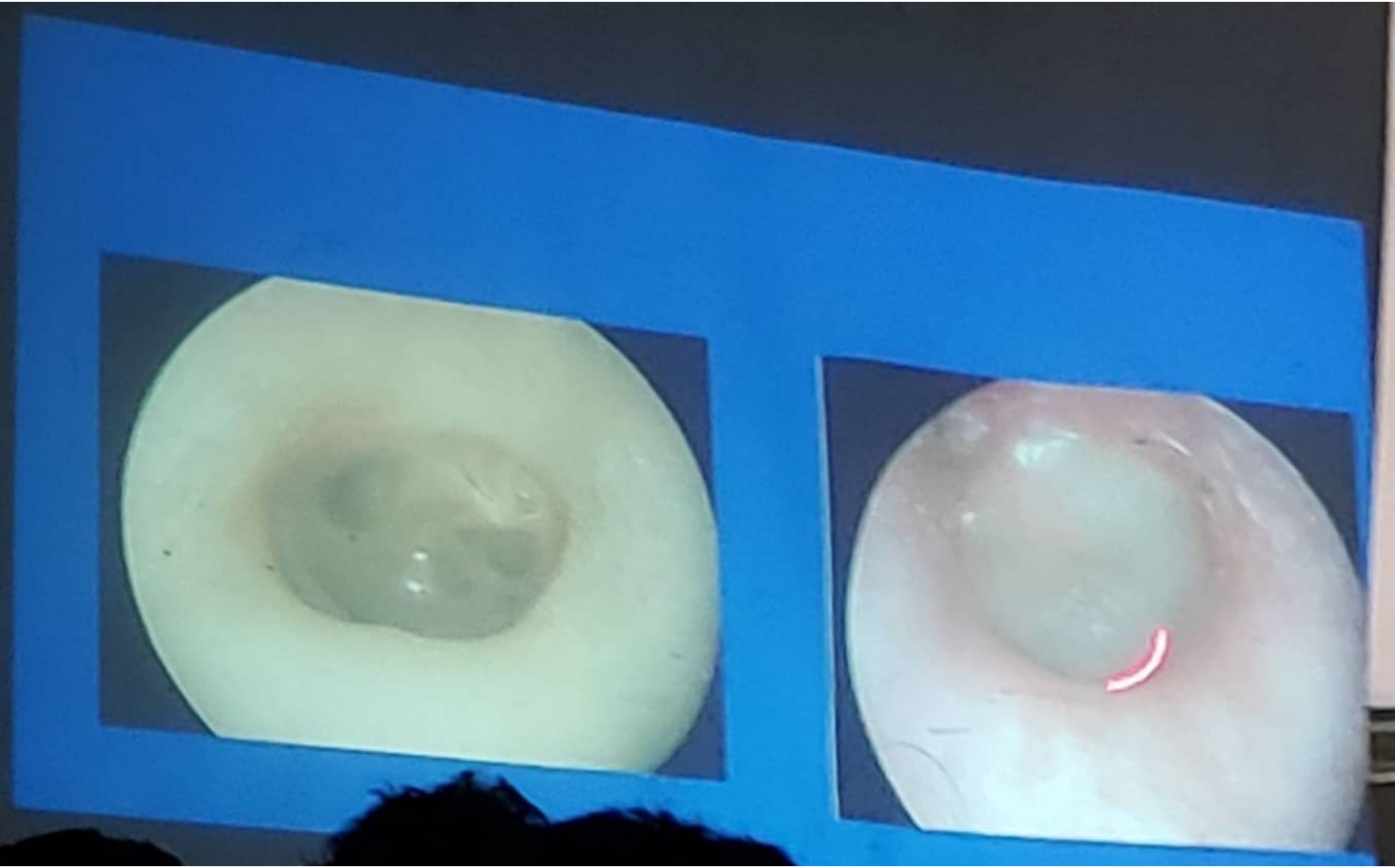
POSITION

TM normally inclined downwards and medially

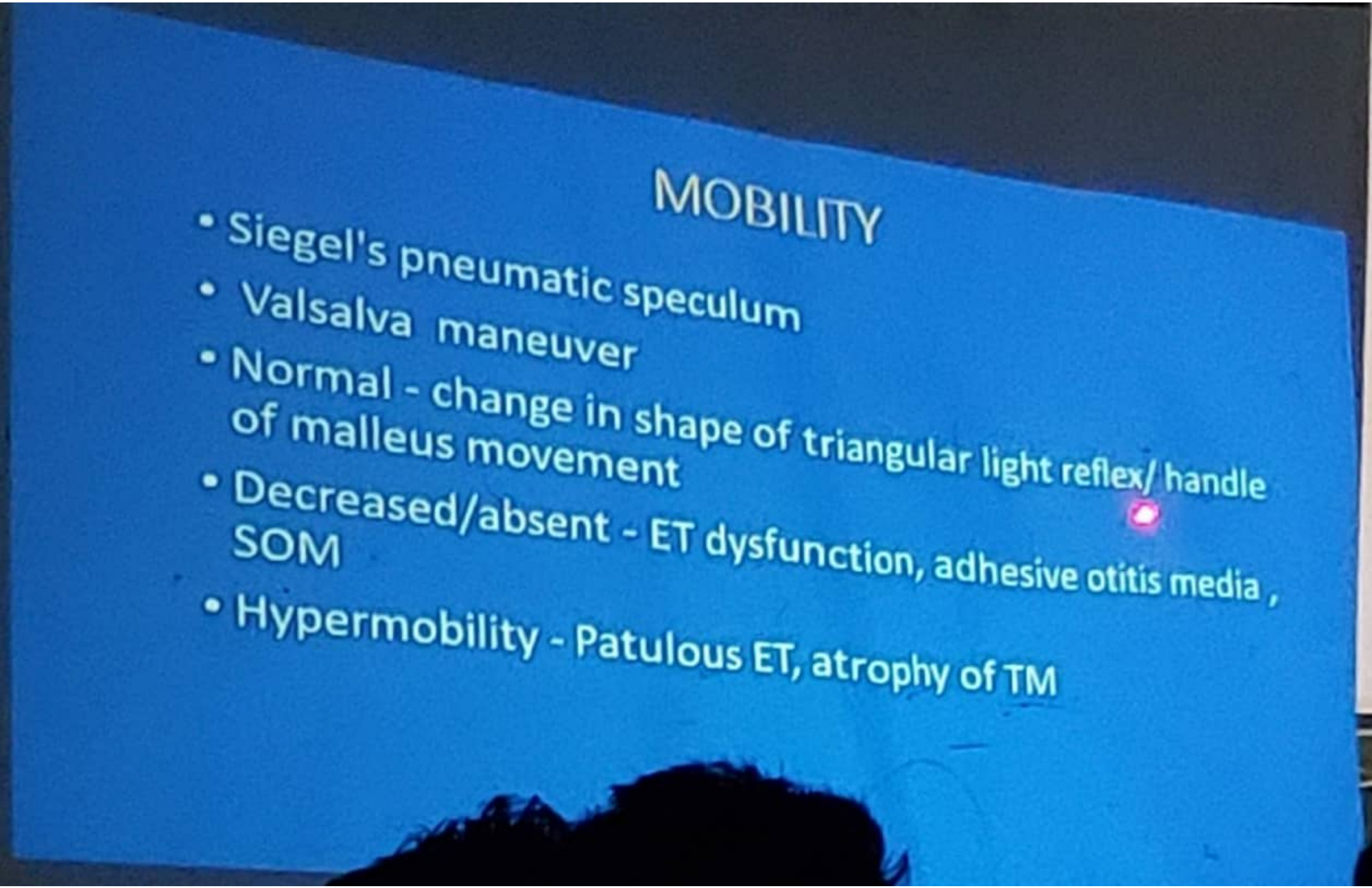
- *bulging TM* :(increase length of handle of malleus, less prominent short process and malleolar folds, absence of cone of light)

retracted TM:(shortening of handle of malleus, more prominent short process, anterior and post malleolar folds, distorted cone of light)

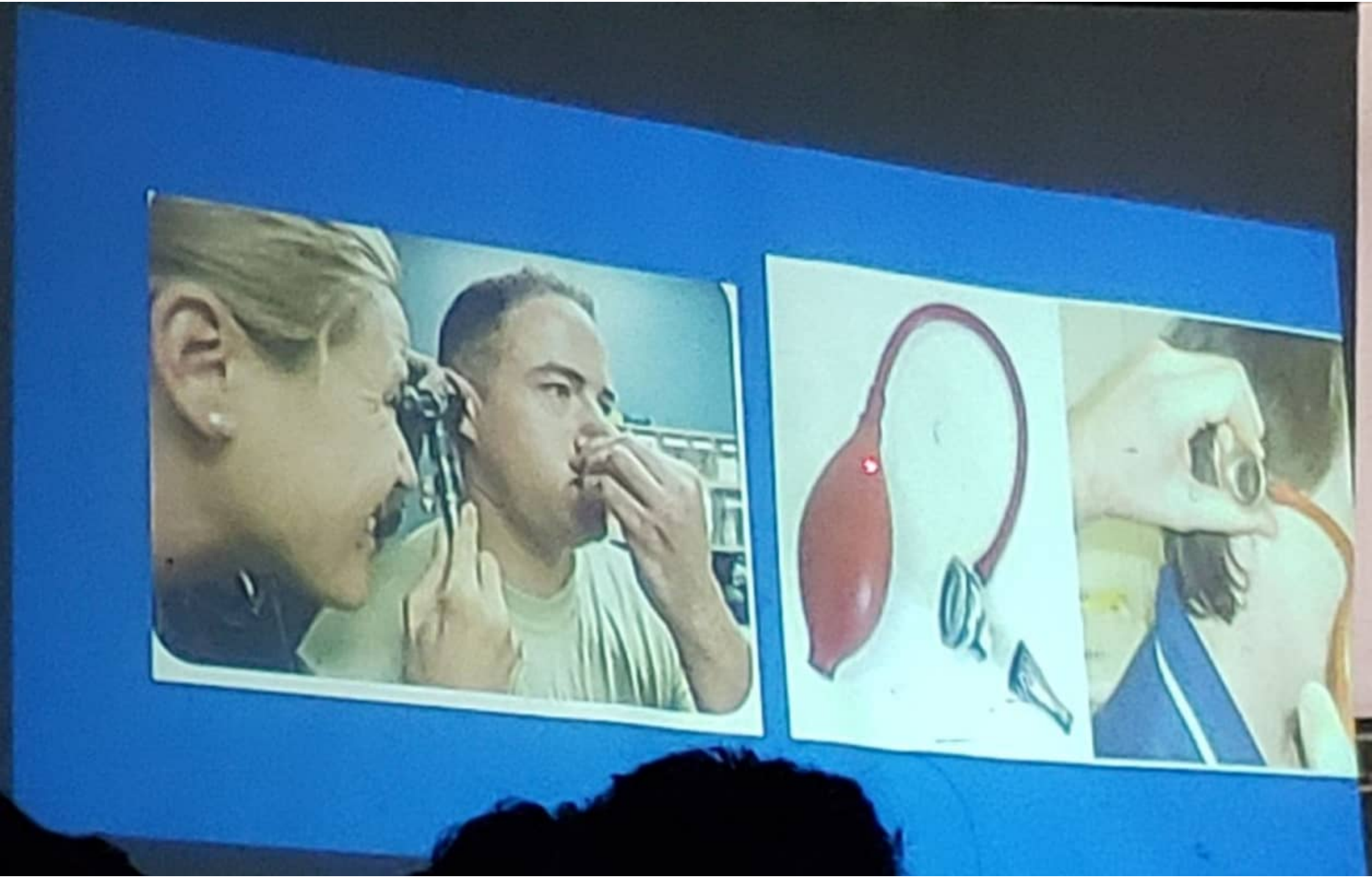
الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner

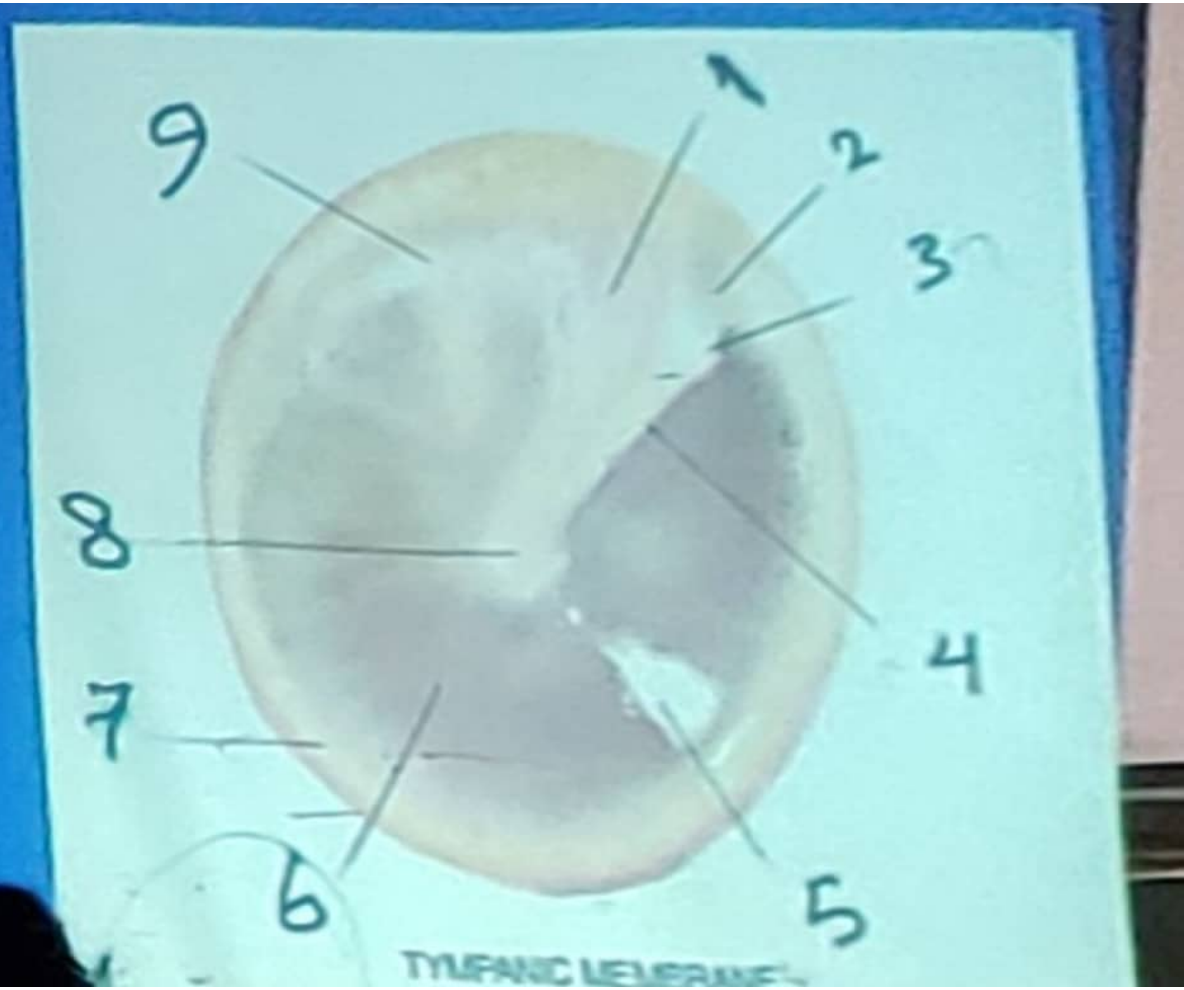


الممسوحة ضوئيا بـ CamScanner

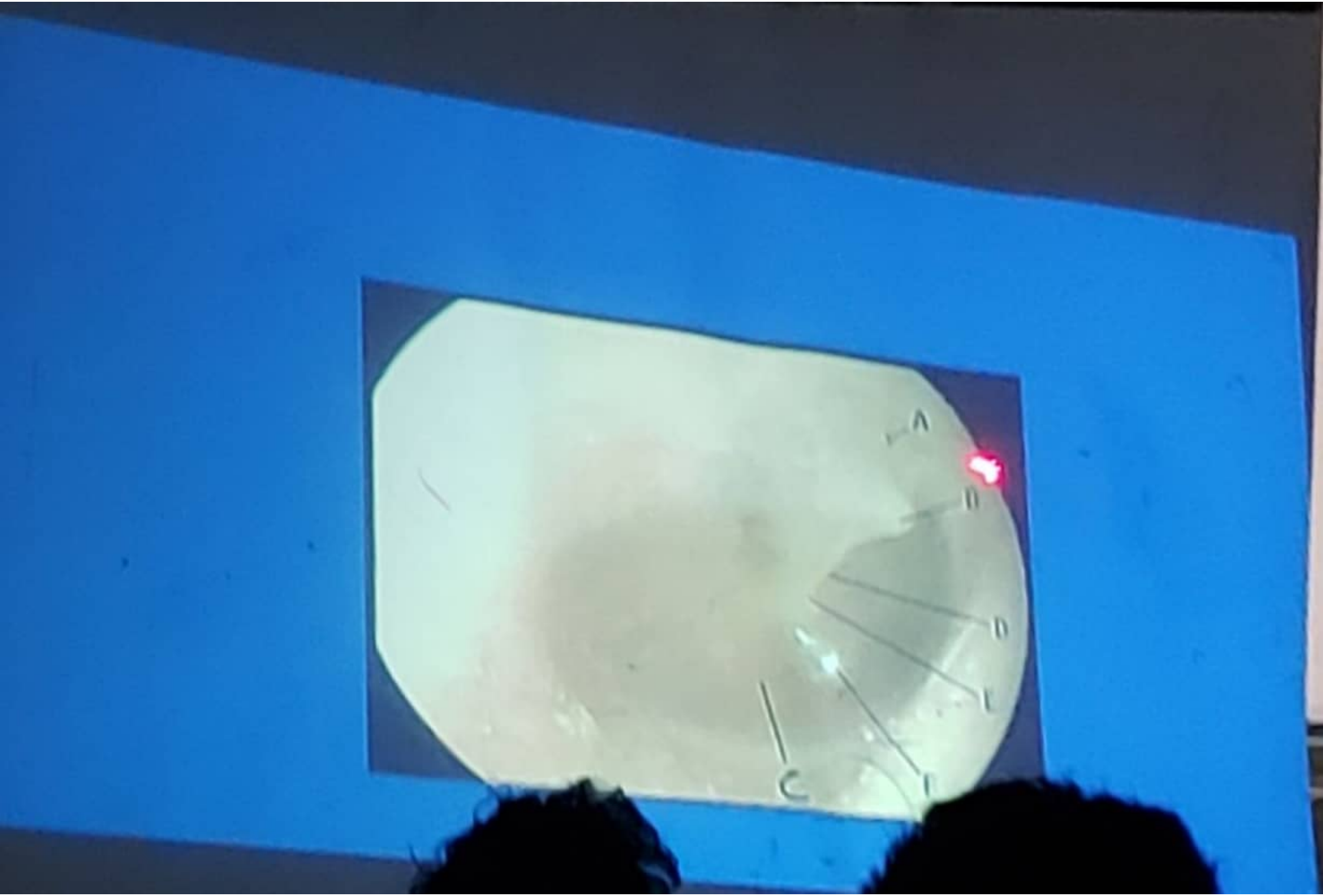


الممسوحة ضوئيا بـ CamScanner

Q:This is a normal tympanic membrane mention structures seen in the picture

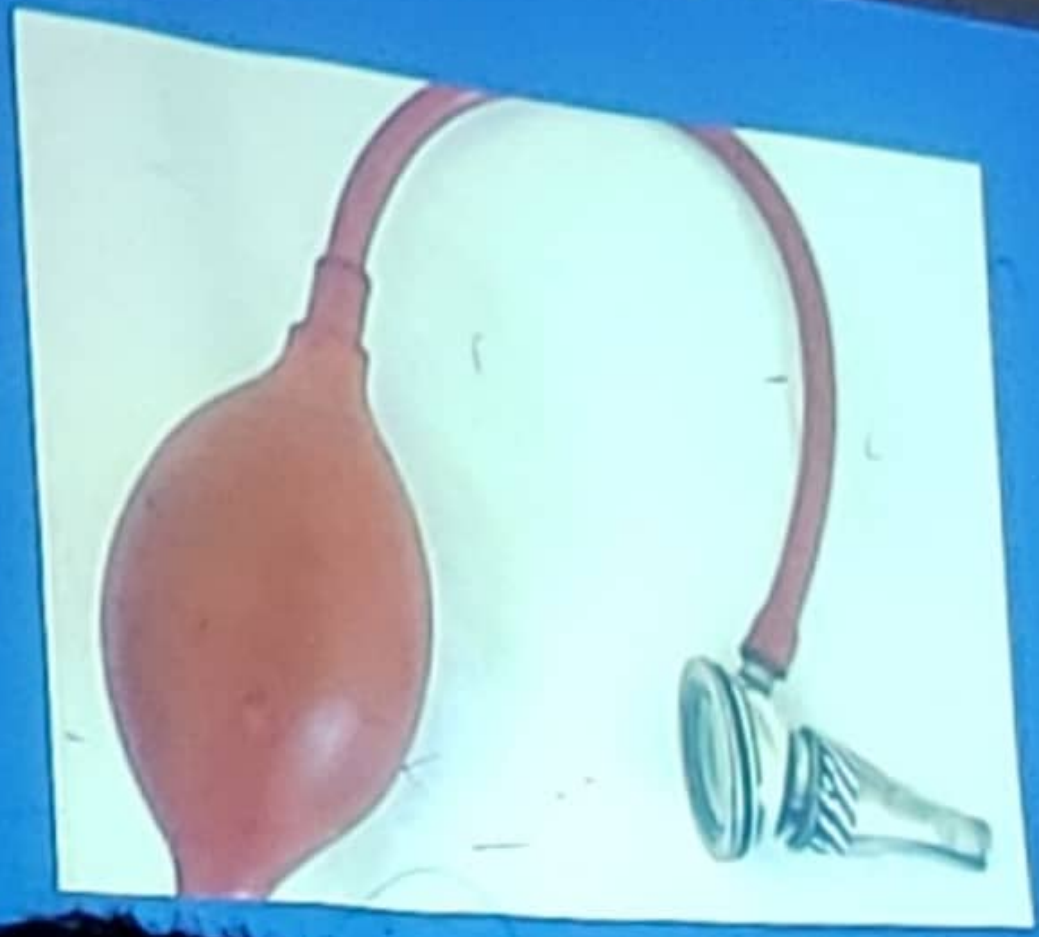


الممسوحة ضوئيا بـ CamScanner



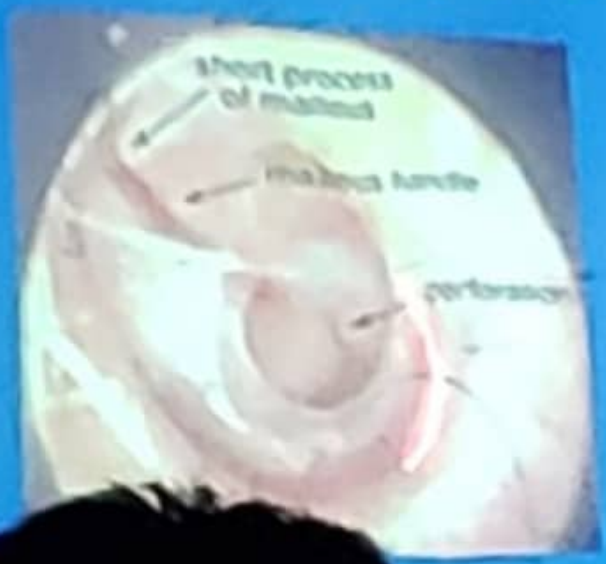
الممسوحة ضوئيا بـ CamScanner

Name the
instrument ?
Enumerate its uses?



الممسوحة ضوئيا بـ CamScanner

- Perforation - ovoid/ kidney shaped/ round,
small, medium, large,
sub total, total, central/marginal,
dry/wet,
margins of perforation – regular?/ irregular edge?



الممسوحة ضوئيا بـ CamScanner

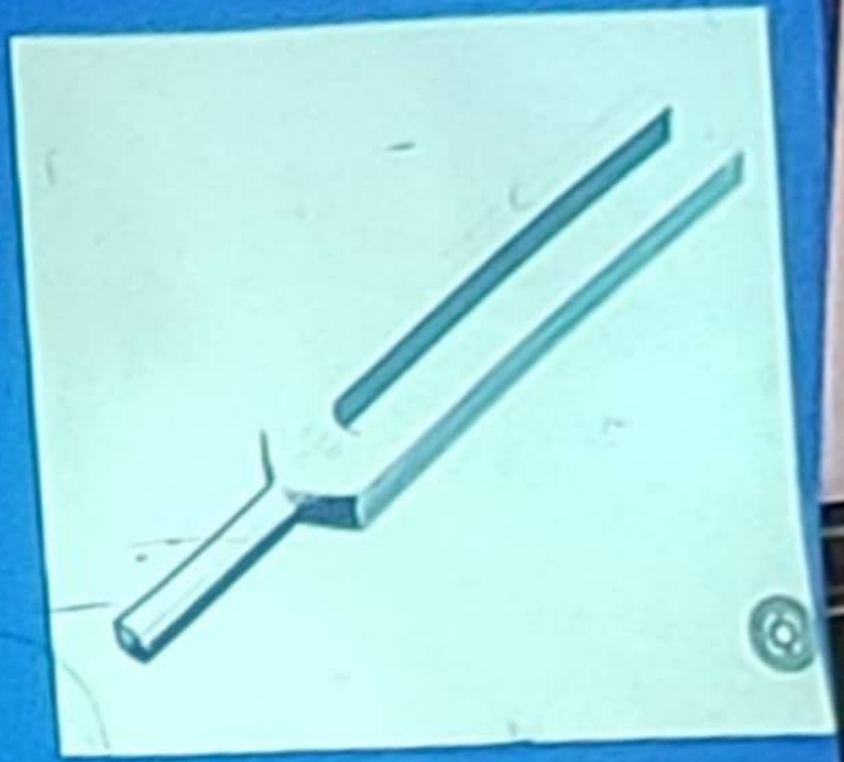
الممسوحة ضوئيا بـ CamScanner

TUNING FORK TESTS

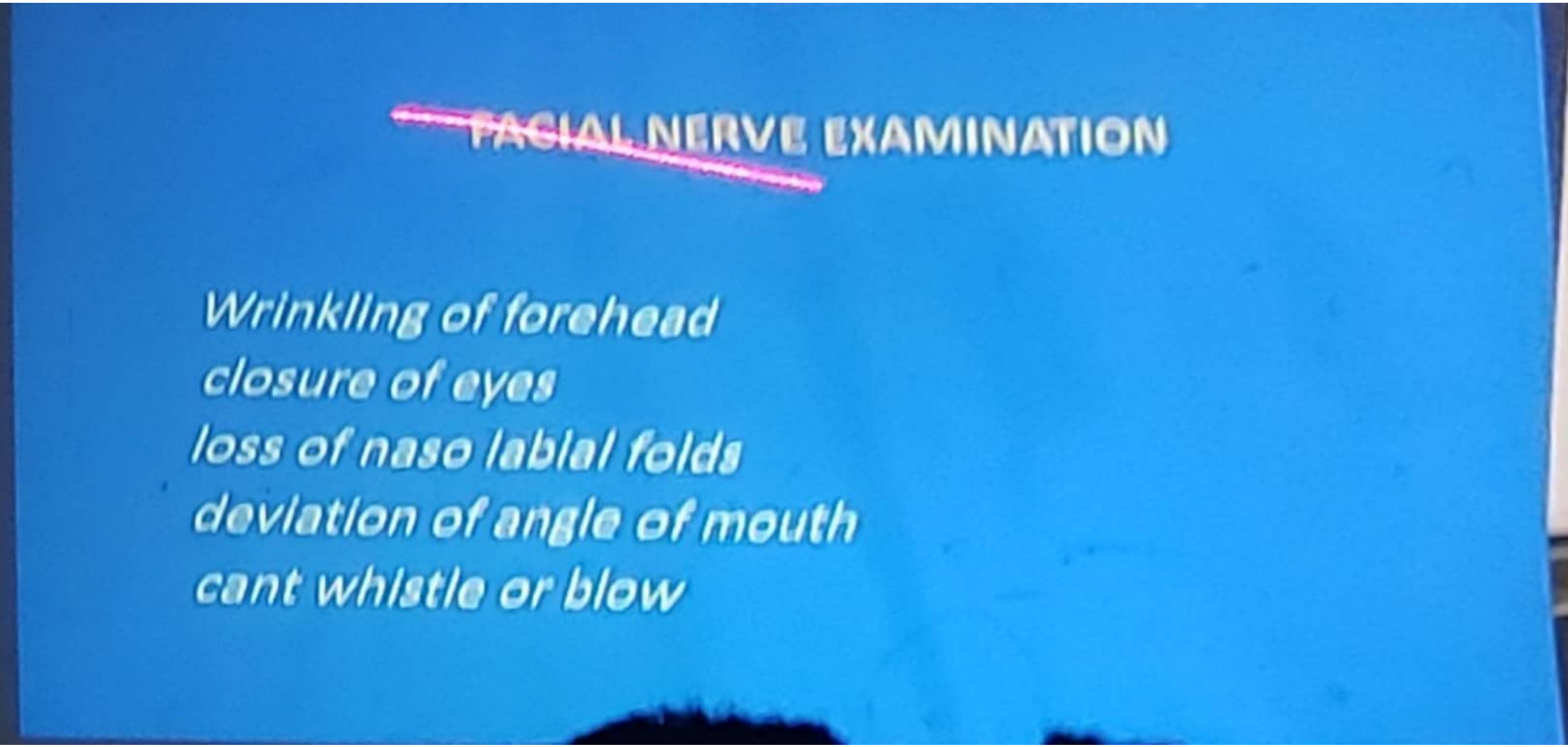
Name the instrument ?

Enumerate its uses?

Why 512?



الممسوحة ضوئيا بـ CamScanner

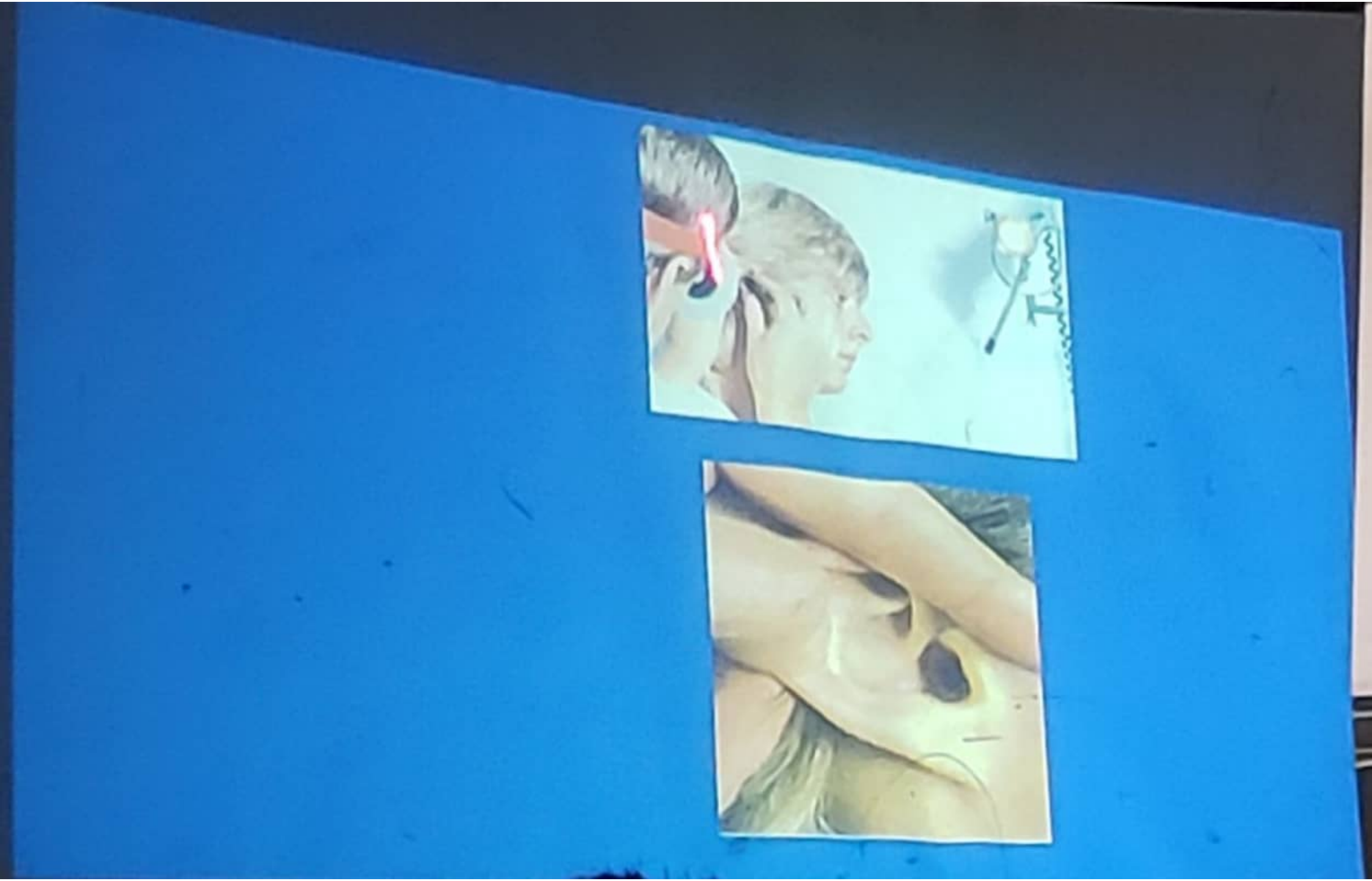


الممسوحة ضوئيا بـ CamScanner

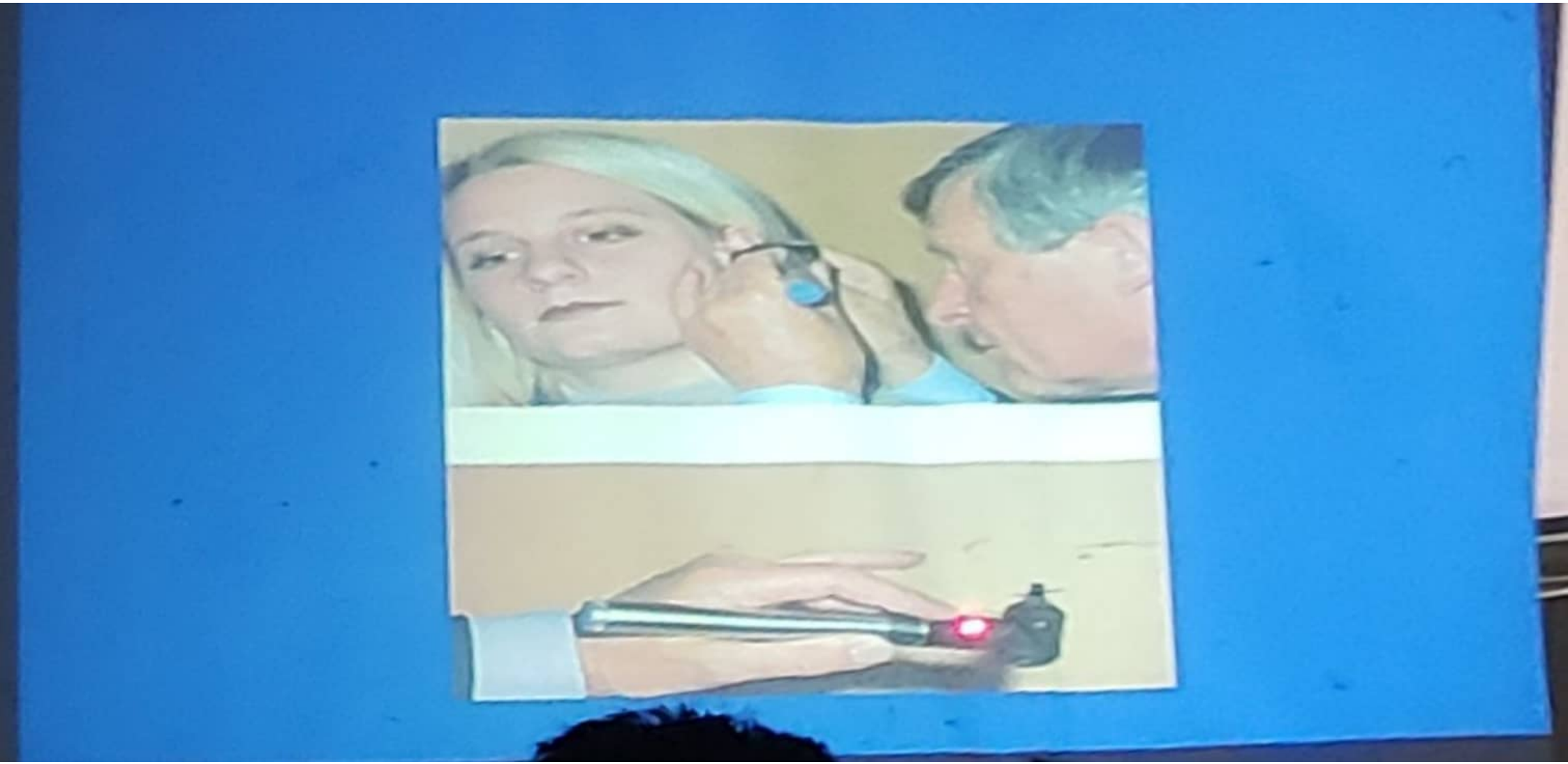
- **AUSCULTATION**
- Stethoscope over ear canal/ mastoid - bruits heard in vascular lesions
- Stethoscope into EAM transmitted sounds heard in patulous ET

الممسوحة ضوئيا بـ CamScanner

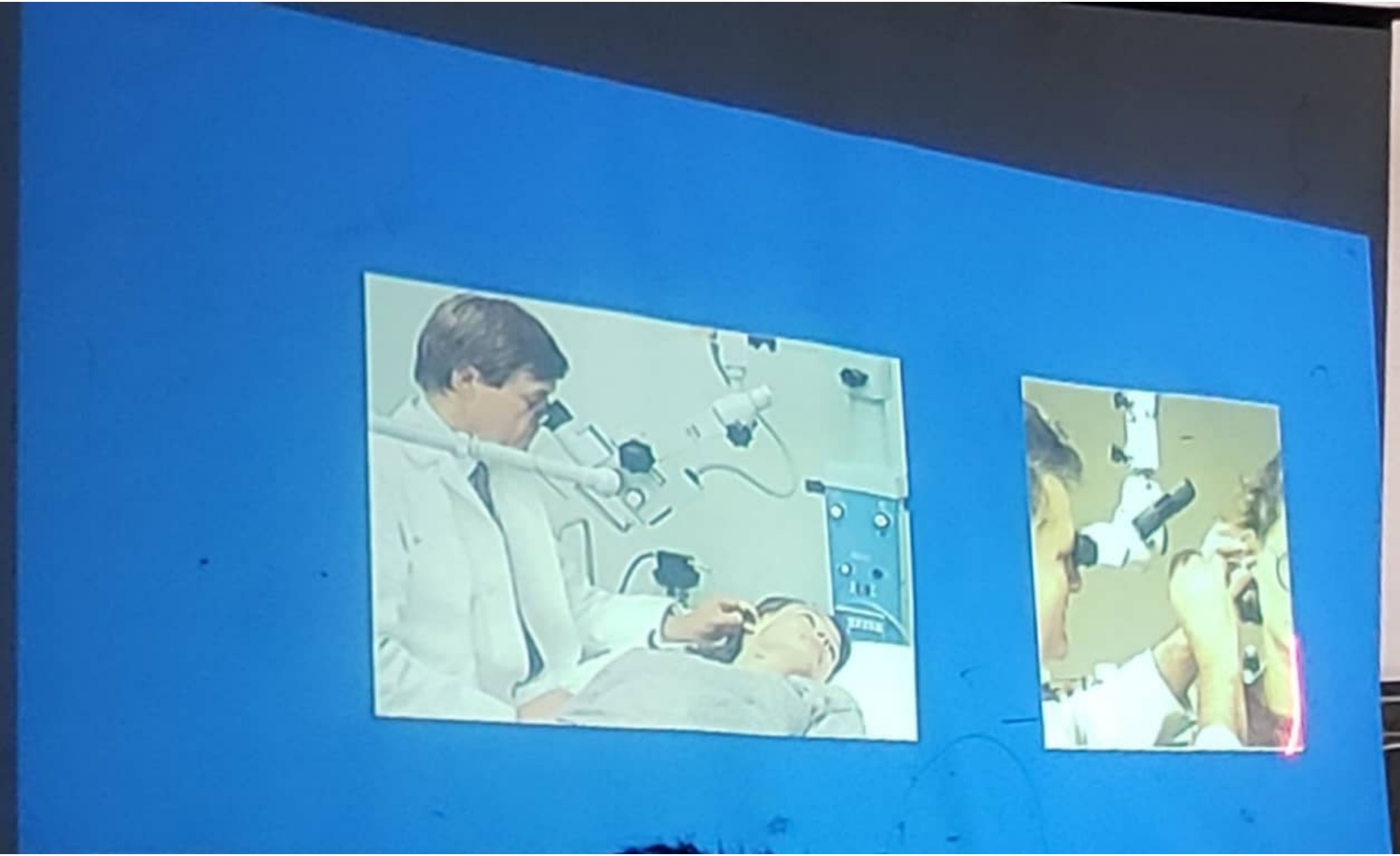
الممسوحة ضوئيا بـ CamScanner



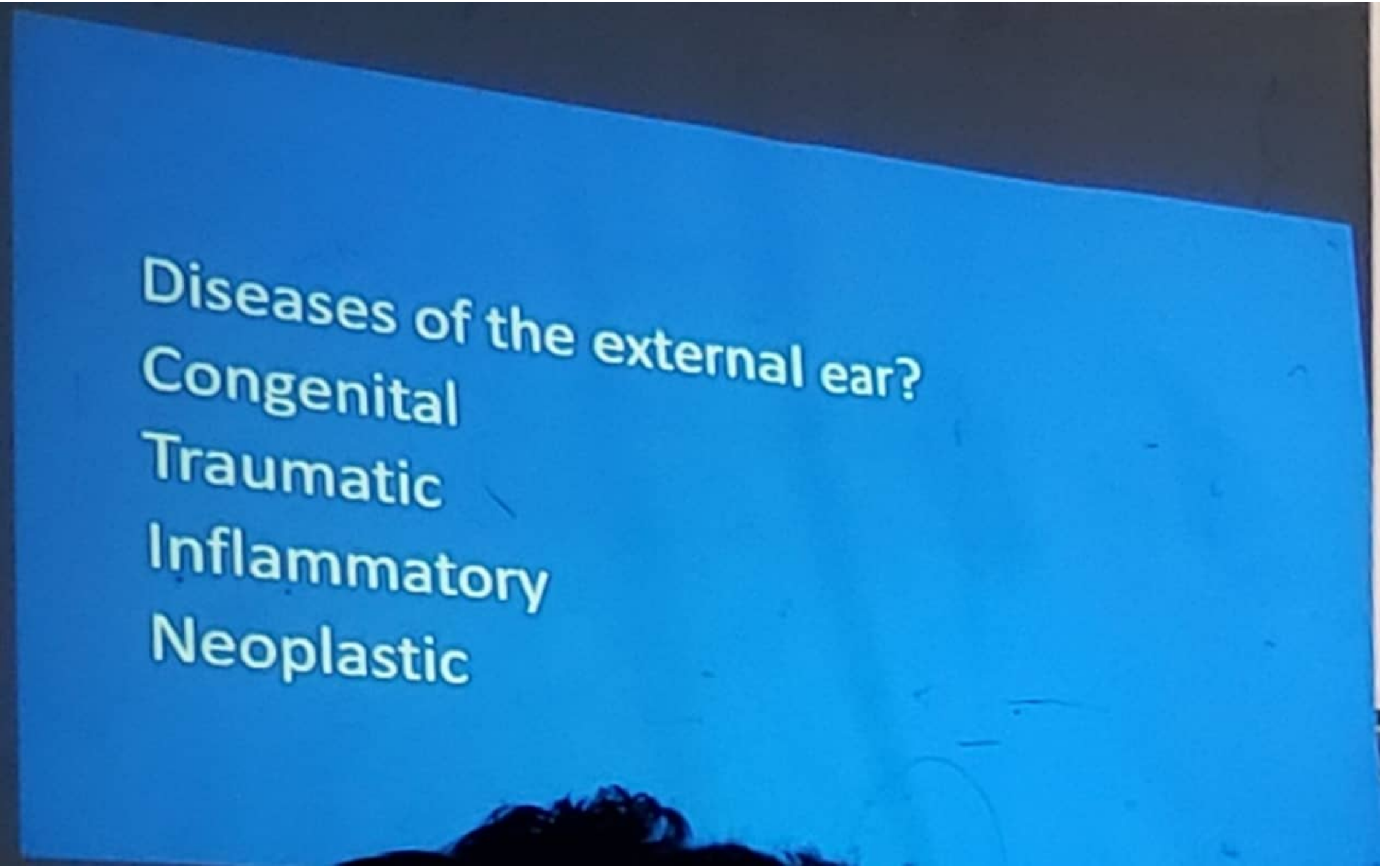
الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner



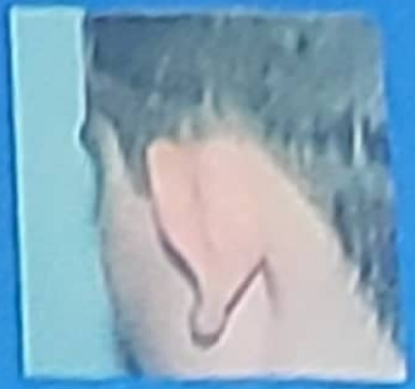
الممسوحة ضوئيا بـ CamScanner

This is image of RT ear

What dose it show?

What is the management?

الممسوحة ضوئيا بـ CamScanner



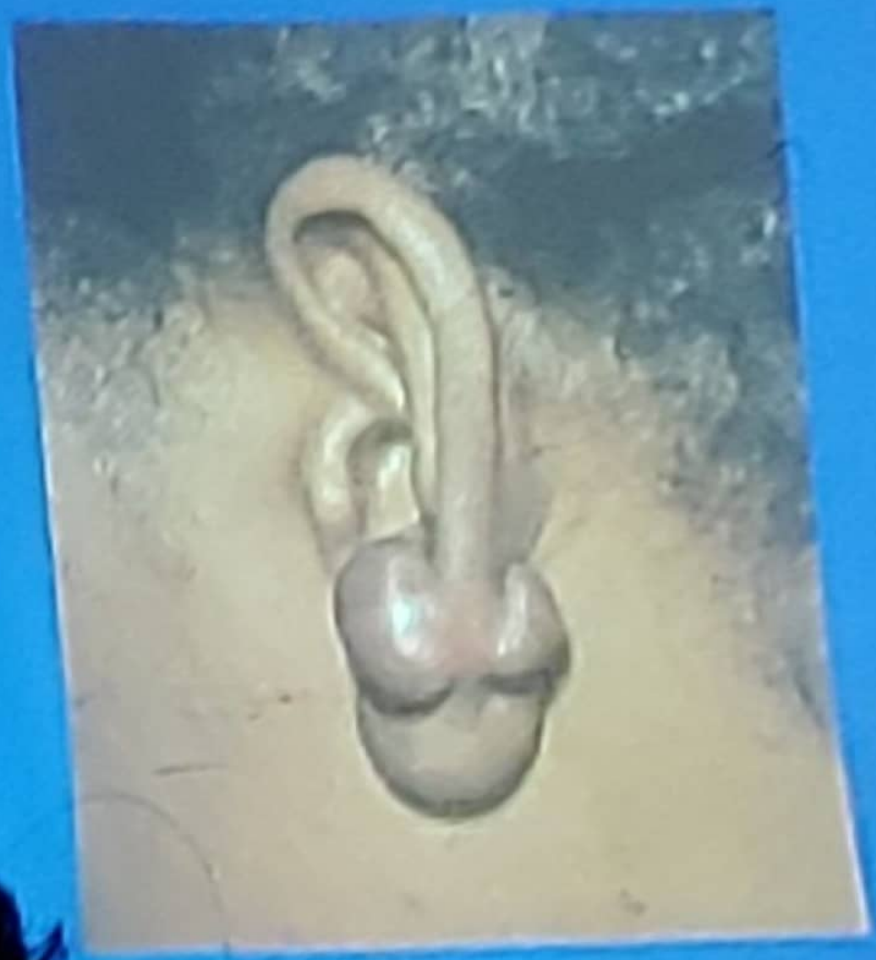
- Diagnoses
- Treatment

الممسوحة ضوئيا بـ CamScanner

- What is the diagnoses ?

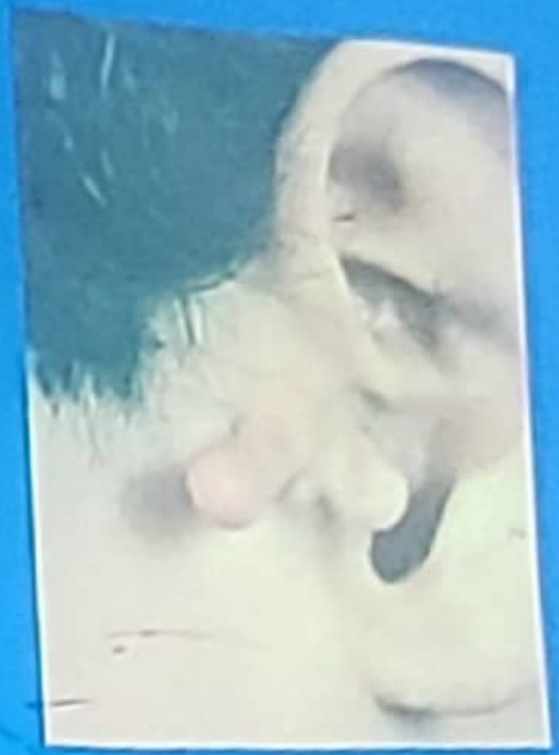
Underlying pathology

- and management?



الممسوحة ضوئيا بـ CamScanner

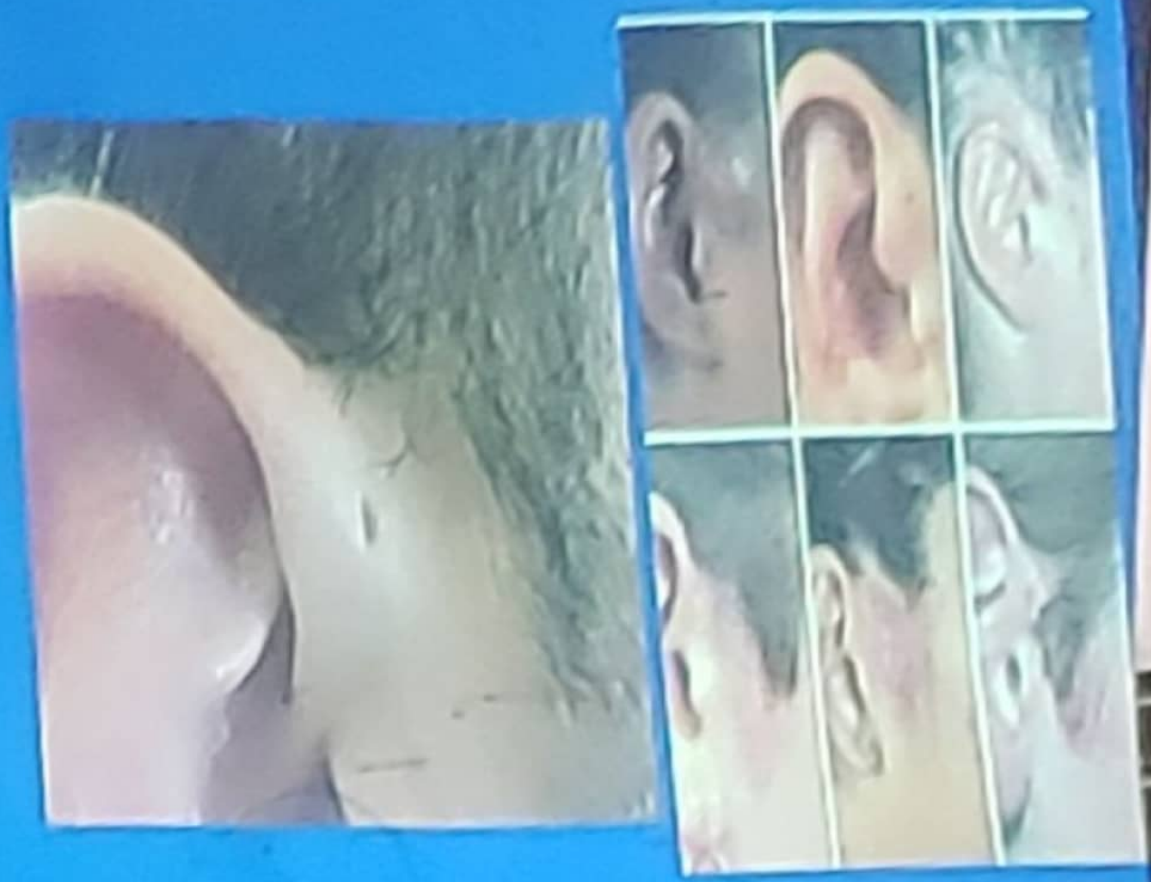
- Diagnoses
- Treatment



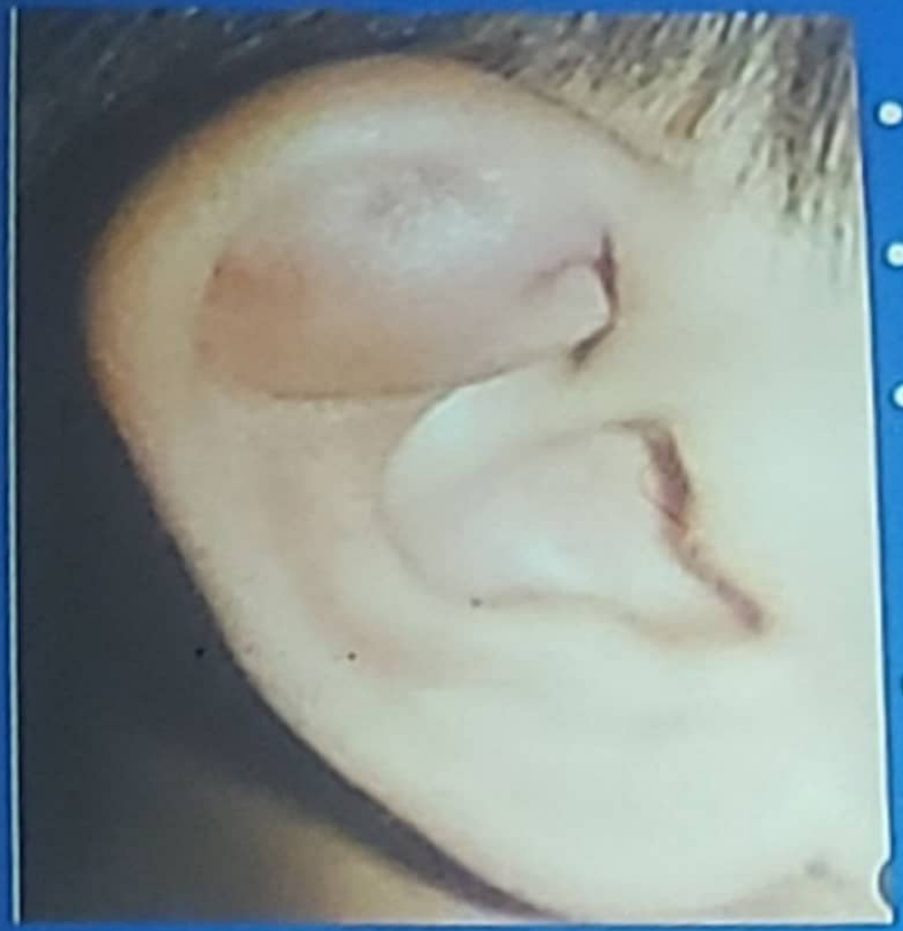
الممسوحة ضوئيا بـ CamScanner

What is the abnormality seen?

What the possible complications and the subsequent management ?

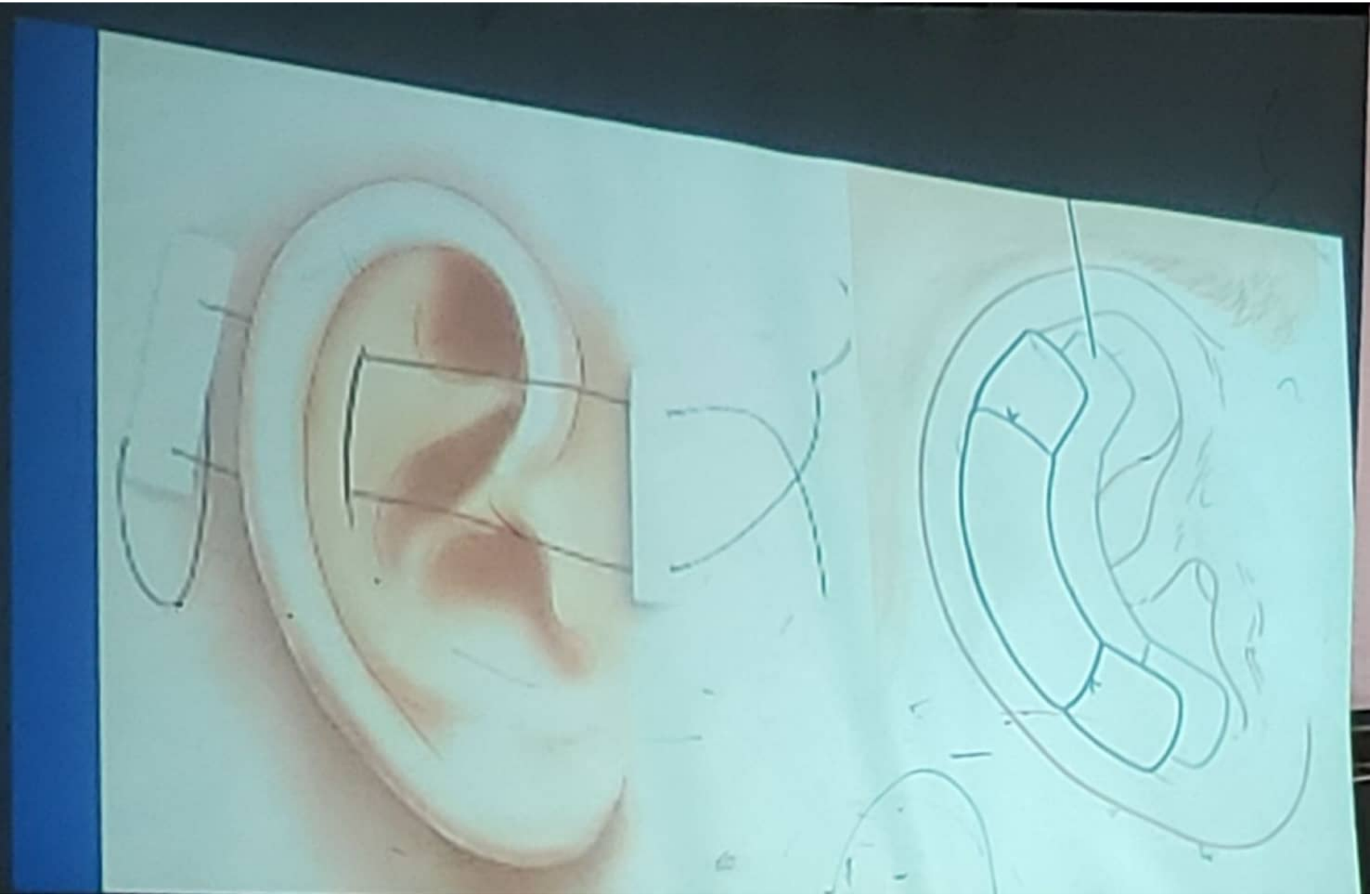


الممسوحة ضوئيا بـ CamScanner

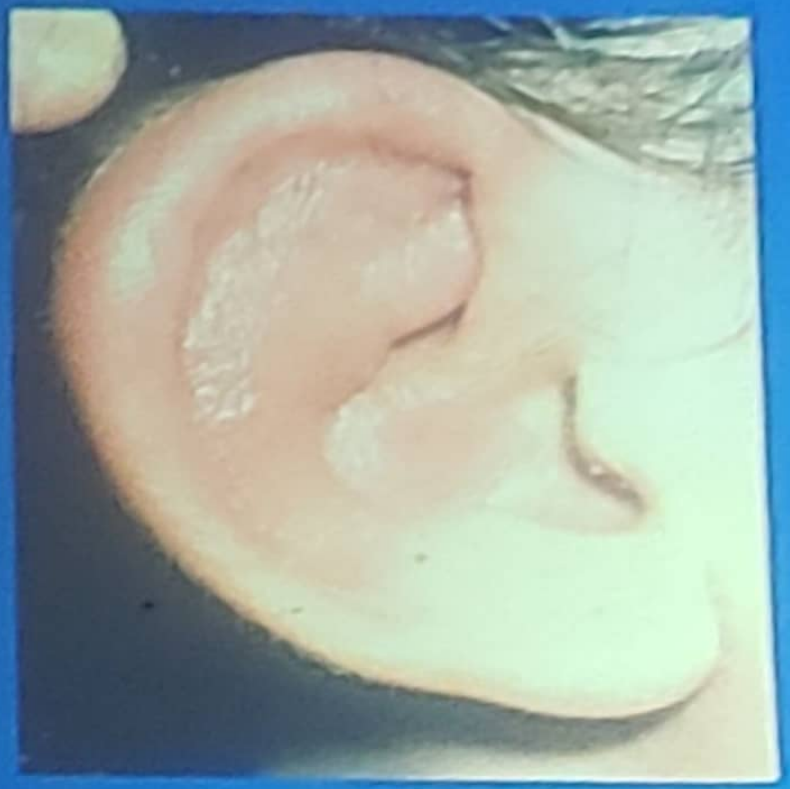


- Describe the findings.
- Give the most likely diagnosis?.
- How would this lesion be managed?
- List potential Complication that can be occur?

الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner



What is your diagnosis?

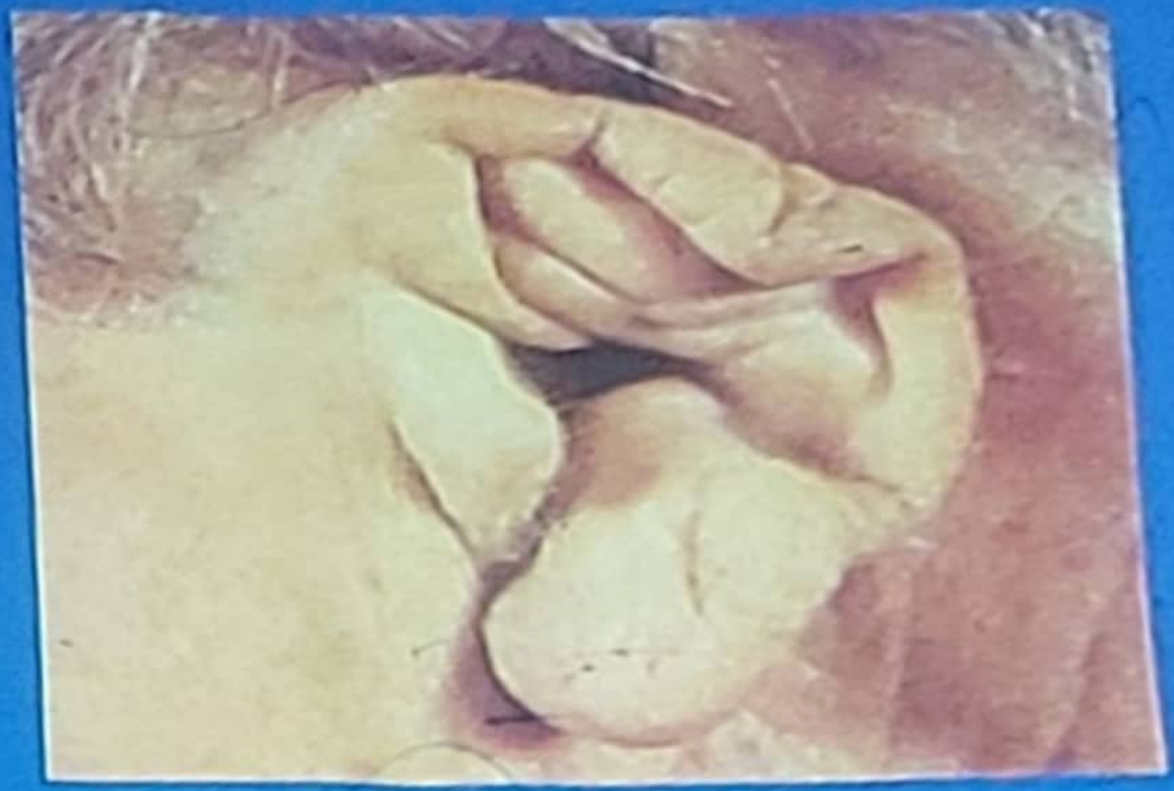
Give 3 causes

- Differential diagnosis?
- List the Complication
- Out line the Treatment

الممسوحة ضوئيا بـ CamScanner

Name this deformity.

what are the most common causes of this condition?



الممسوحة ضوئيا بـ CamScanner

A 60year male presents with facial weakness and rash.

Name the syndrome.

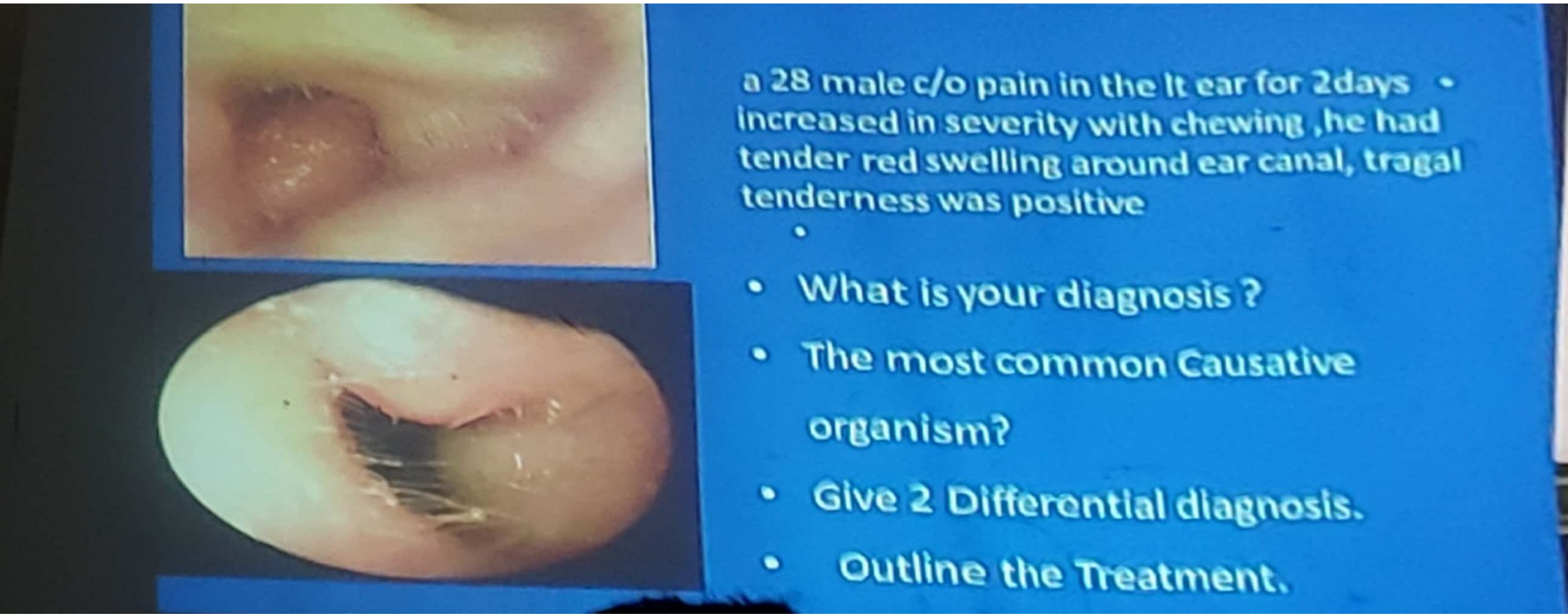
What the causative organism?

Outline further management of this patient.

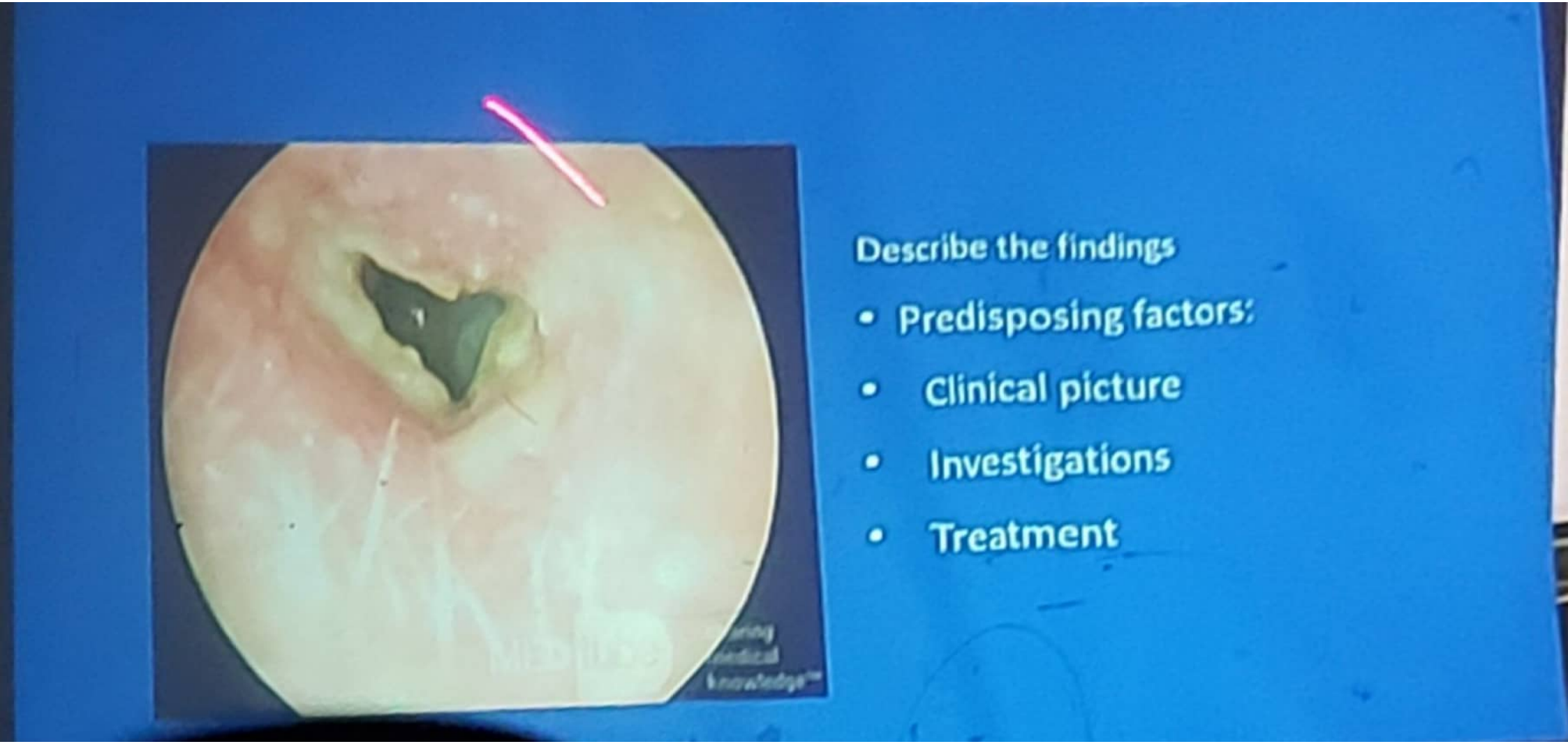
Give 2 other symptoms

Triad

الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner

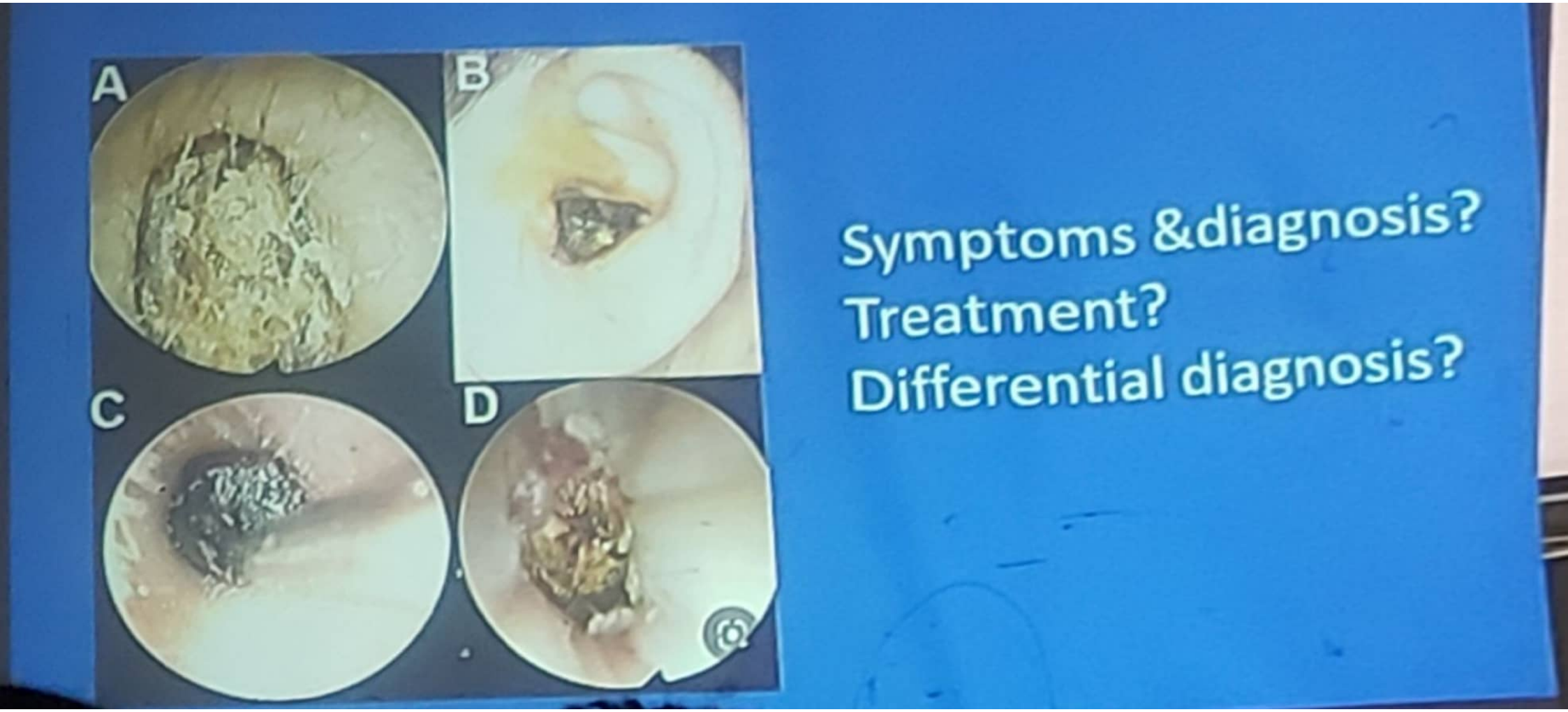
65 yr old man ,diabetic15yr, c/o : lt ear pain , purulent discharge – 1month , tragal tenderness-15days, inability to close lt eye -10 days

- Describe the findings.
- What could be the diagnosis?
- Probable causative organism?
- Outline the management (investigations & treatment)

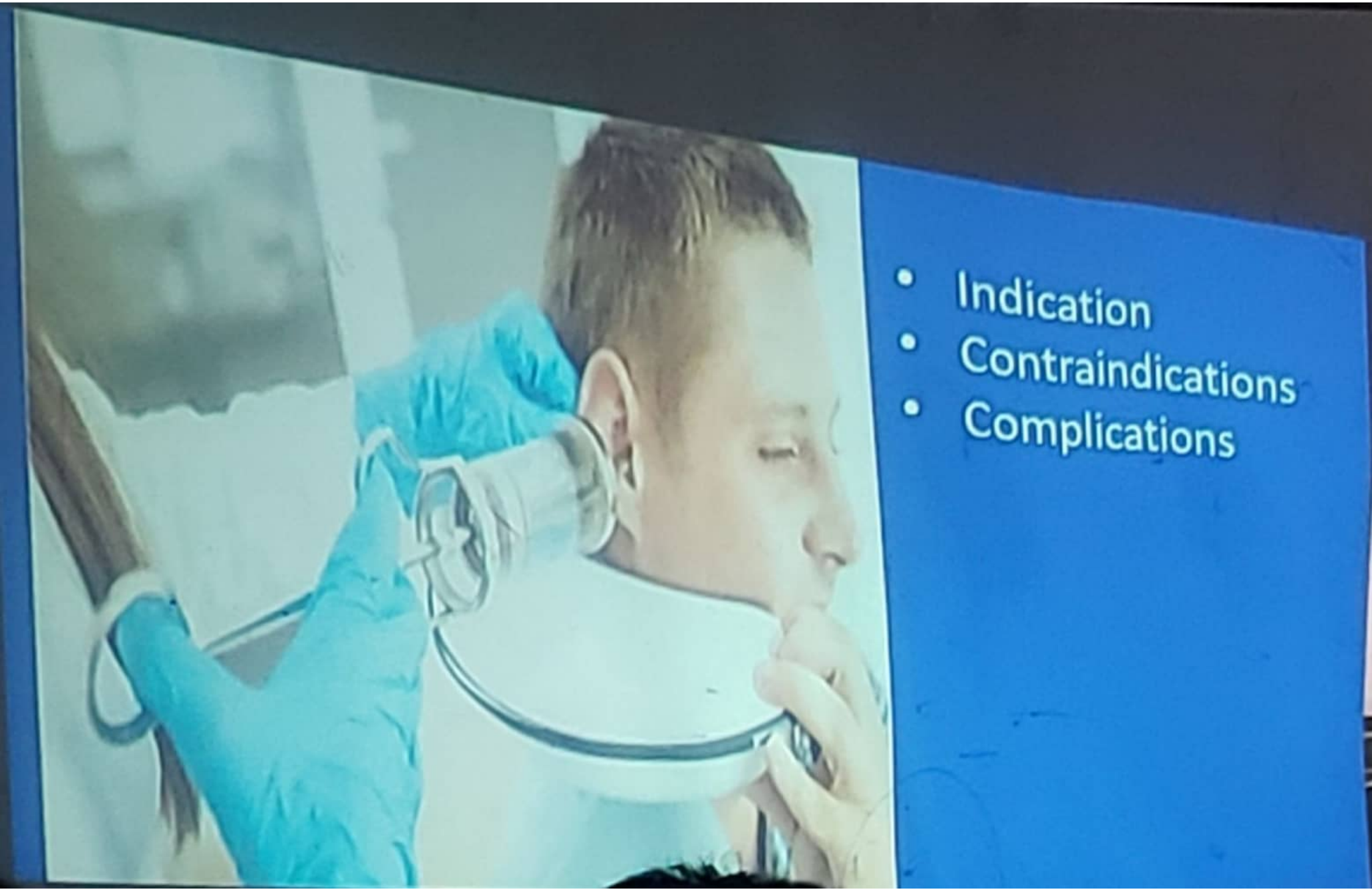
الممسوحة ضوئيا بـ CamScanner

- Describe the lesion.
- List 2 possible causative organisms& 2 symptoms
- List 4 predisposing factors.
- List 2 components of management

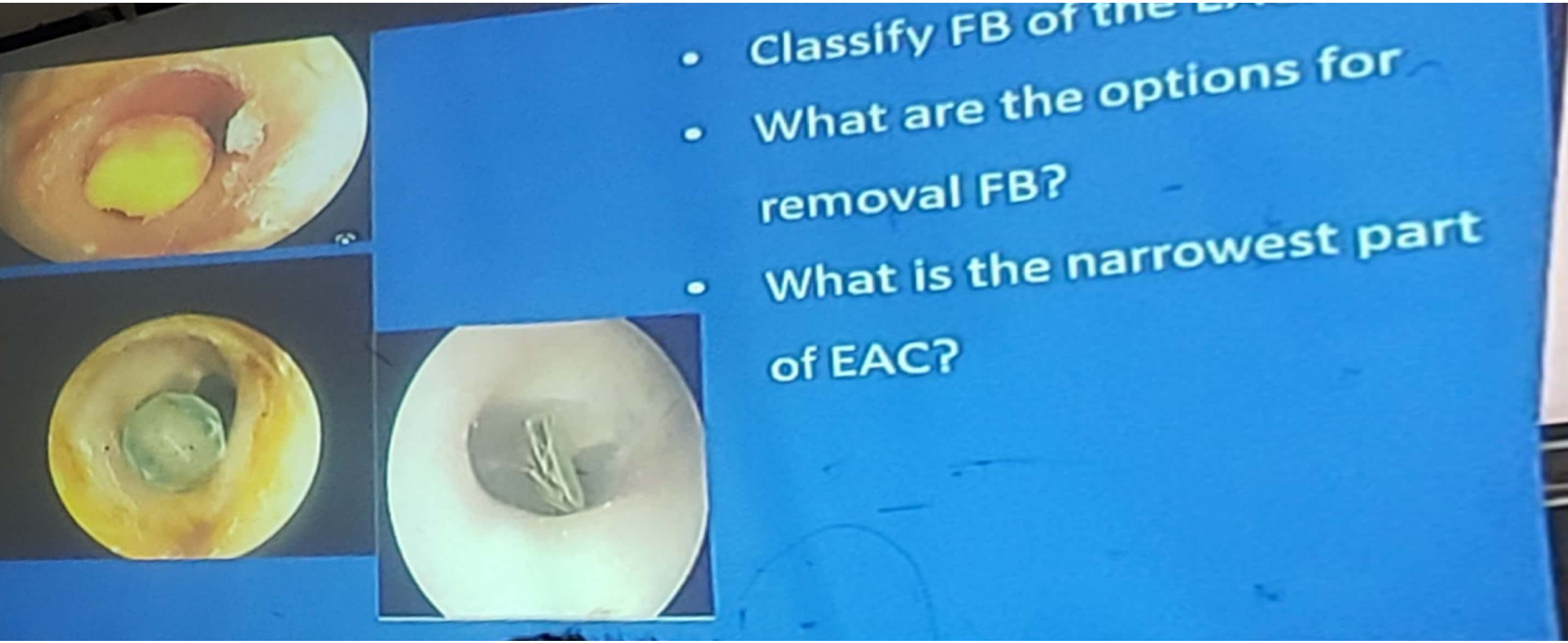
الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner

What is the diagnosis?

List 2 associated symptoms.

What the most common aetiology ?

List 2 Management strategies?

الممسوحة ضوئيا بـ CamScanner

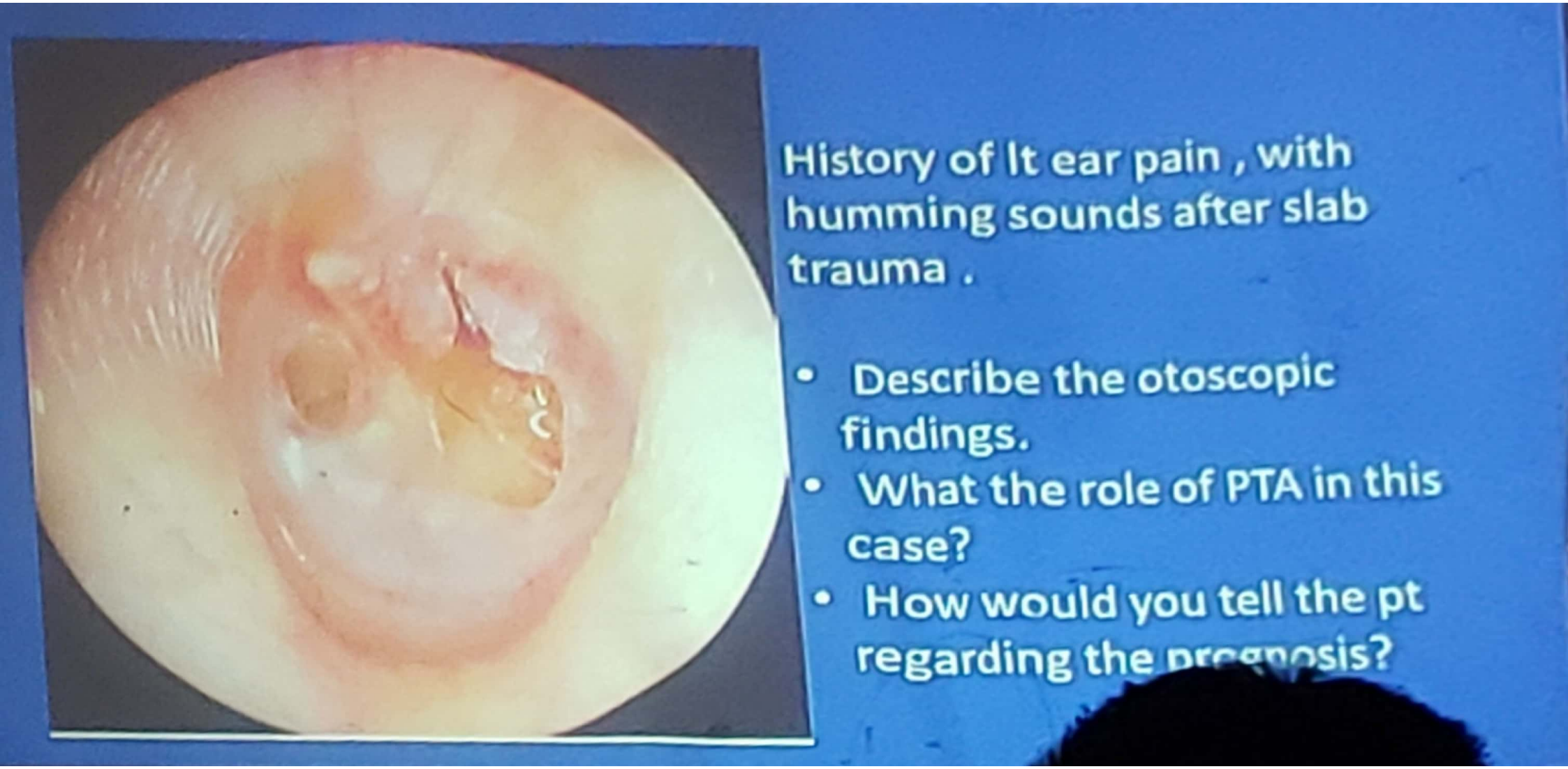
History of acute otalgia 2 days after URTI

Describe the findings.

Give 2 symptoms

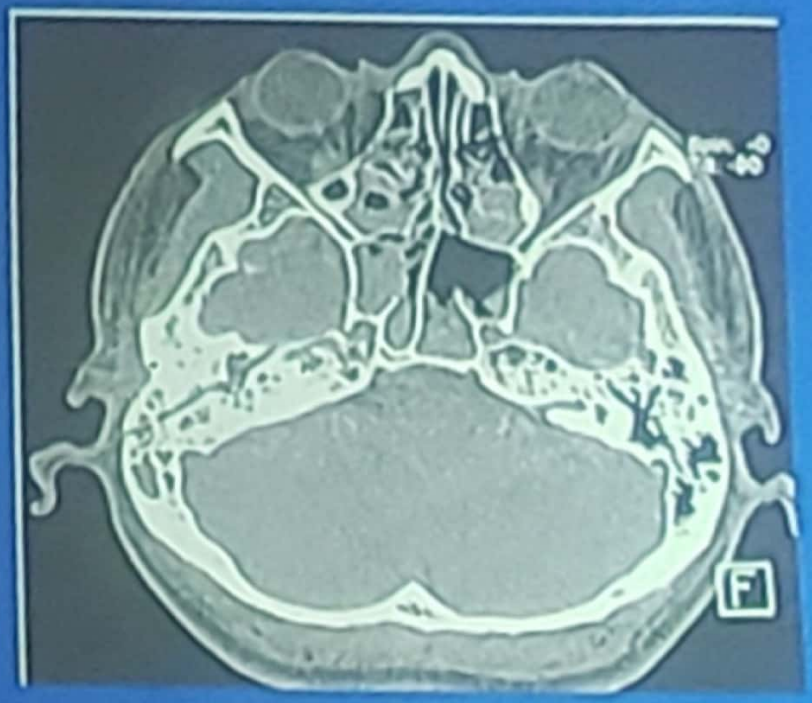
Outline the treatment

الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner

A 24 year old man presents with hearing loss following a road traffic accident (RTA)



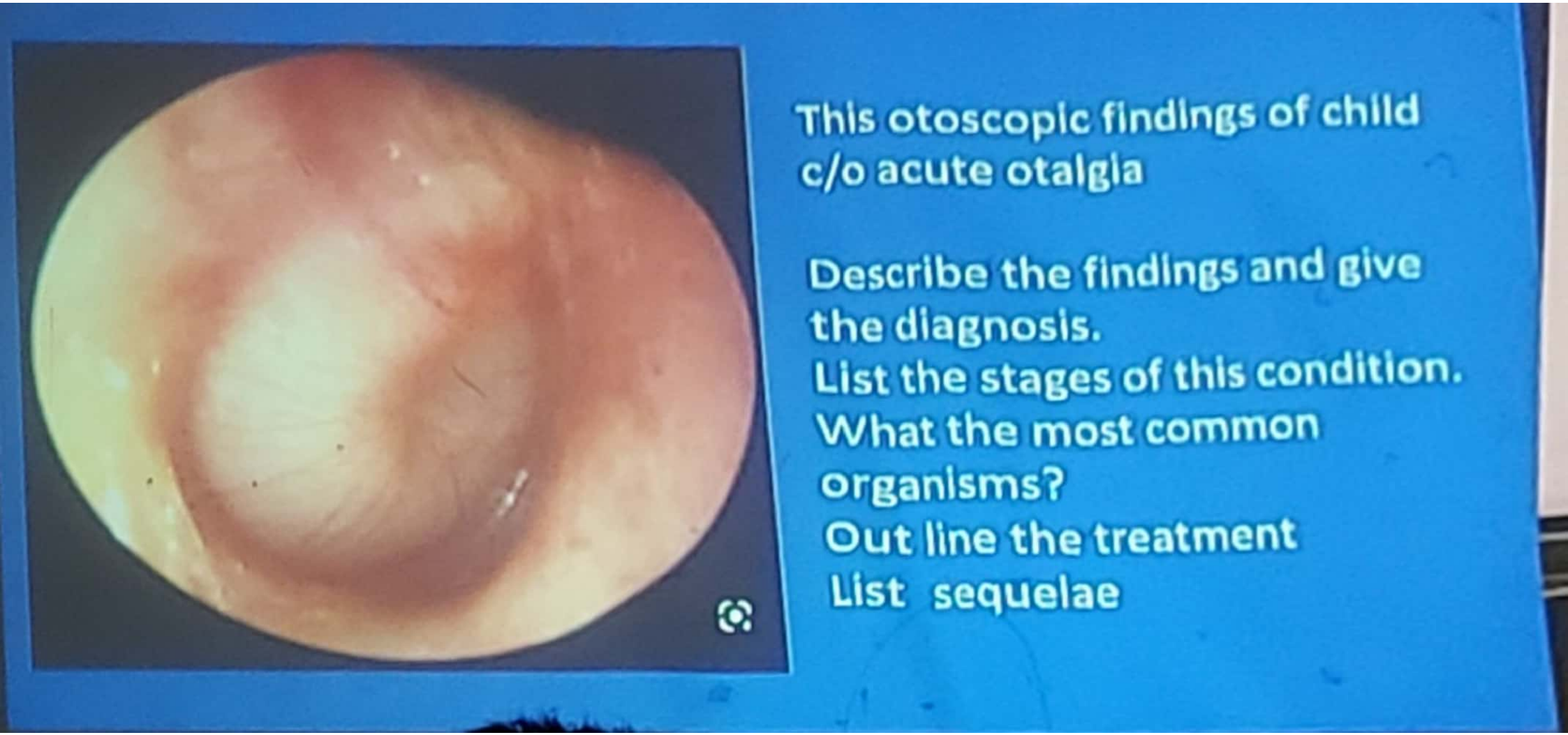
What is this study?

What is the diagnosis?

List 5 symptoms .

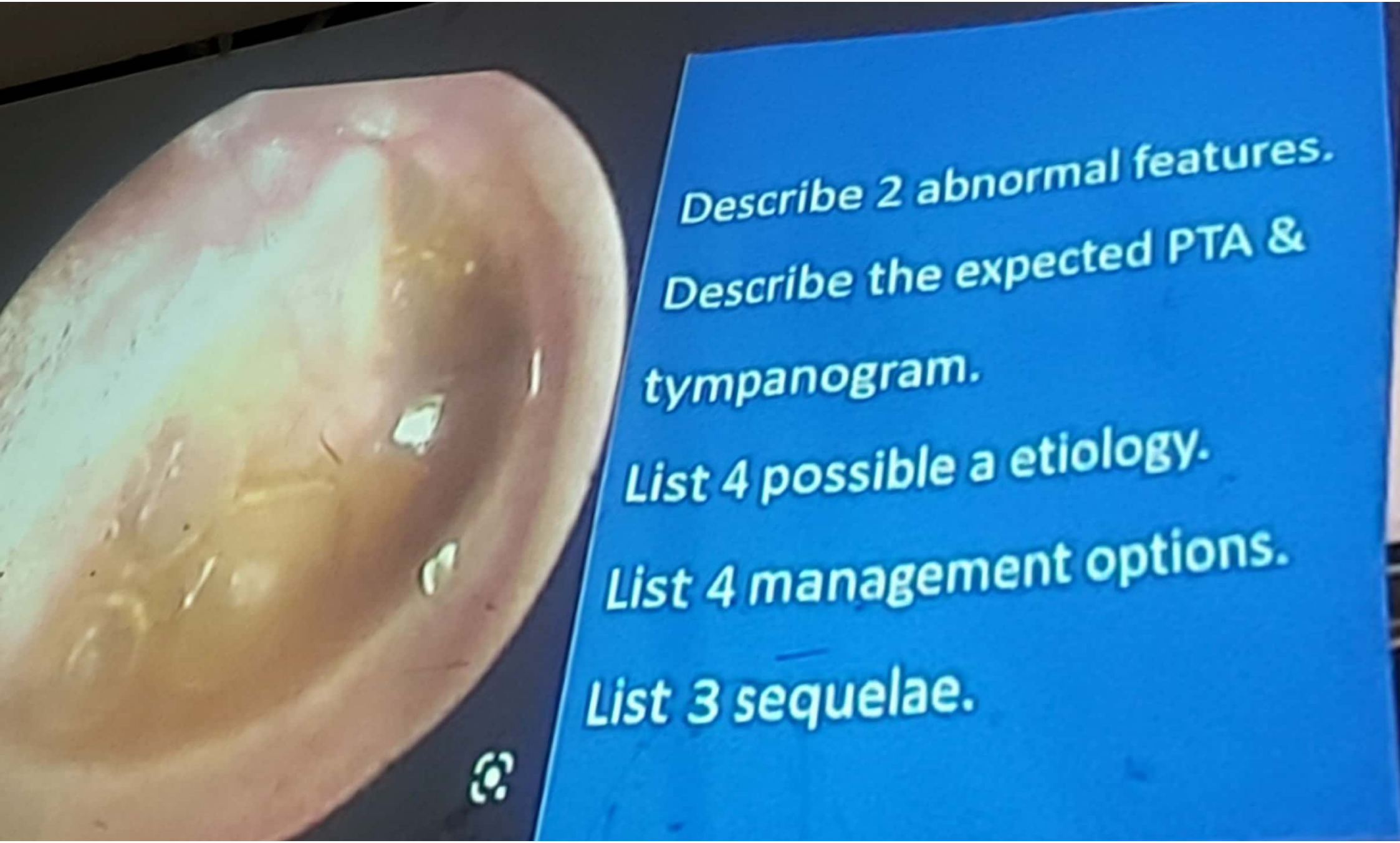
Describe what the PTA would very likely show if it longitudinal type#

الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner

الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner

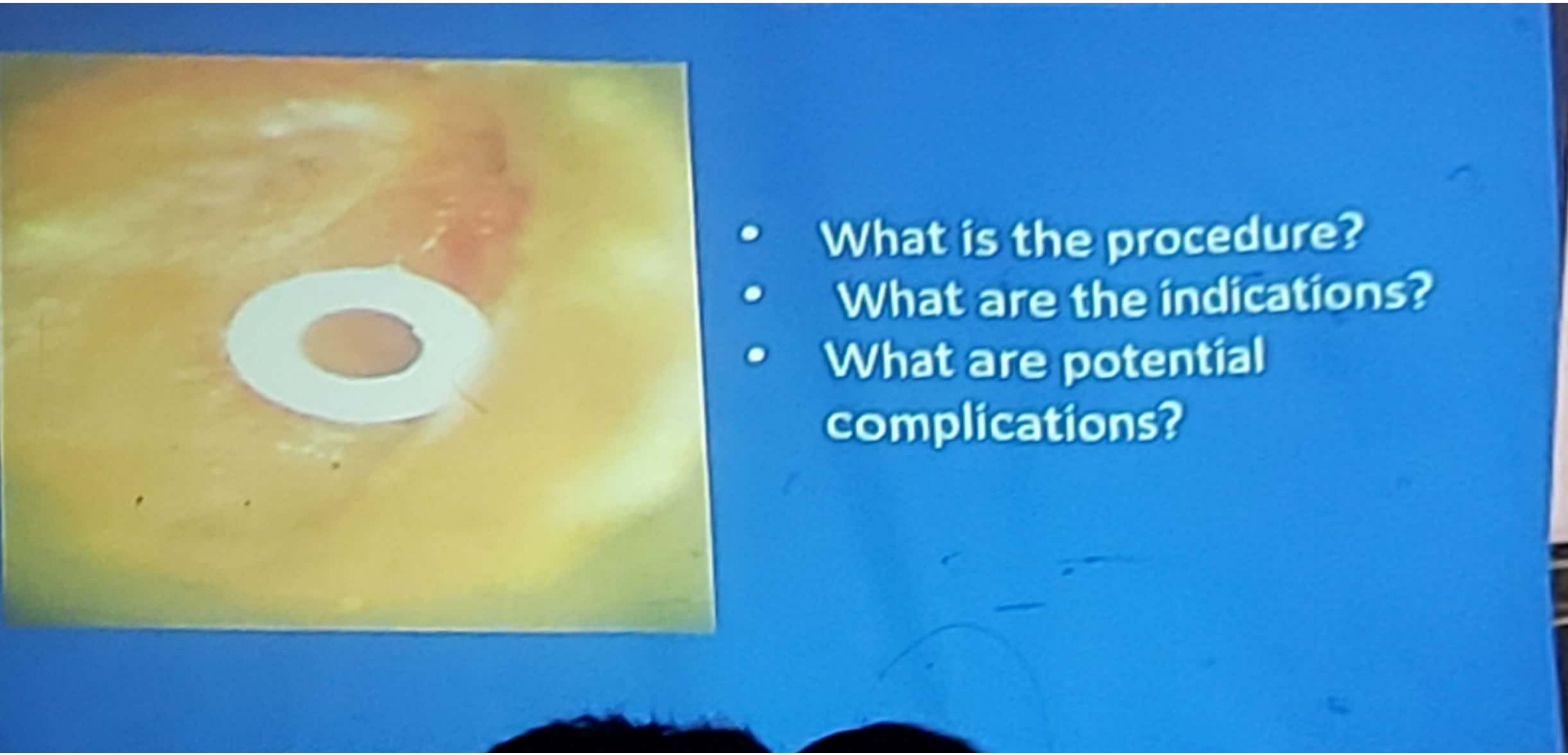
Comment on the tympanic membrane.

Give 3 causes of bilateral retracted tympanic membrane.

Expected PTA& tympanometry

outline the treatment

الممسوحة ضوئيا بـ CamScanner



الممسوحة ضوئيا بـ CamScanner

A middle aged lady c/o reduced of hearing with past history of recurrent ear discharge , otoscopic and tuning fork test was performed.

Describe the findings.
Expected tuning fork test result?
How would be managed?
What aim of surgery?

الممسوحة ضوئيا بـ CamScanner

List 4 causes for this condition

Give 2 symptoms

الممسوحة ضوئيا بـ CamScanner

This patient presented with recurrent ear discharge .

What is the diagnosis, immediate and long term management?

الممسوحة ضوئيا بـ CamScanner

Describe this appearance.

List 4 possible symptoms

List 4 specific complications of surgery.

الممسوحة ضوئيا بـ CamScanner

This patient c/o prolonged ear discharge .otoscopic findings were as shown

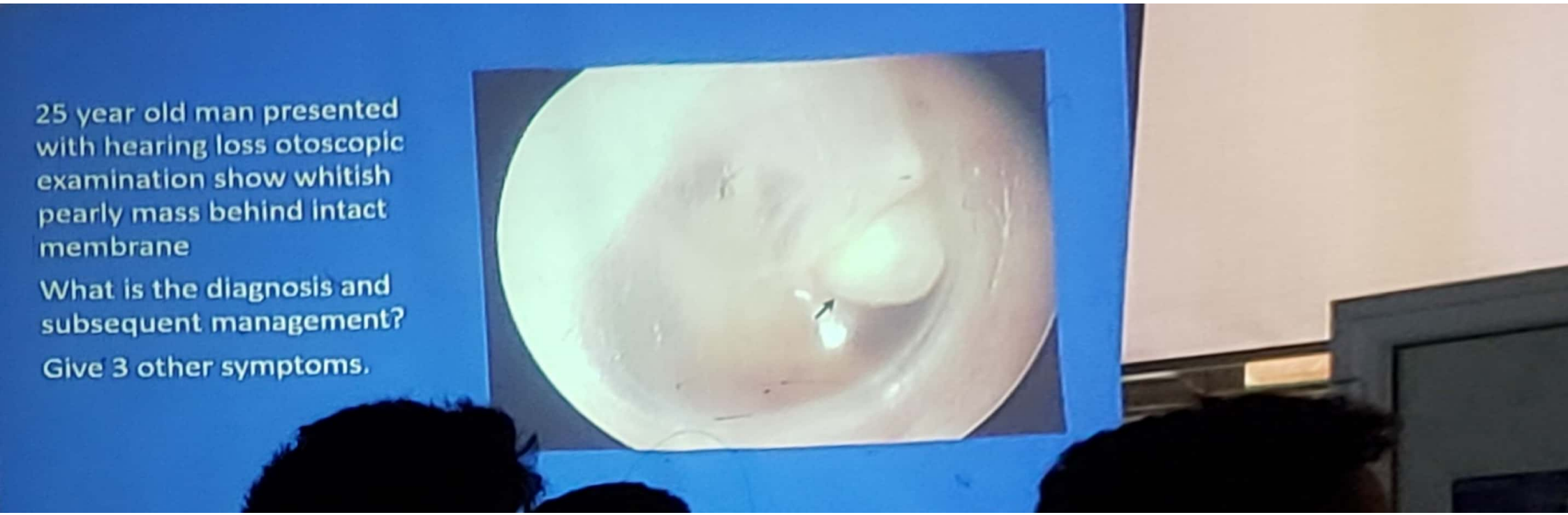
What is the diagnosis?

How is presentation different from CSOM (safe type)

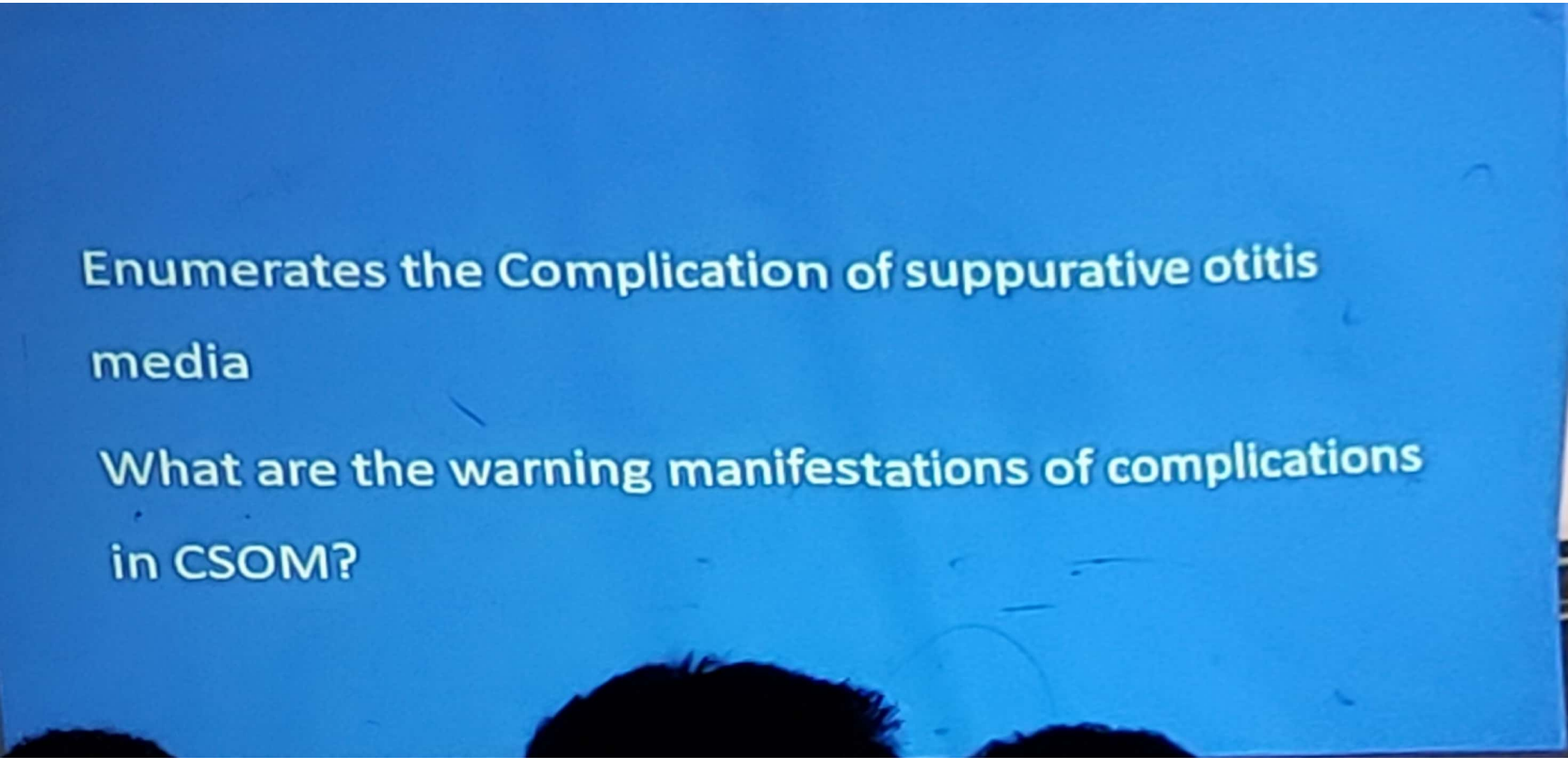
How would this condition be managed further?

List 5 complications if this is left untreated

الممسوحة ضوئيا بـ CamScanner

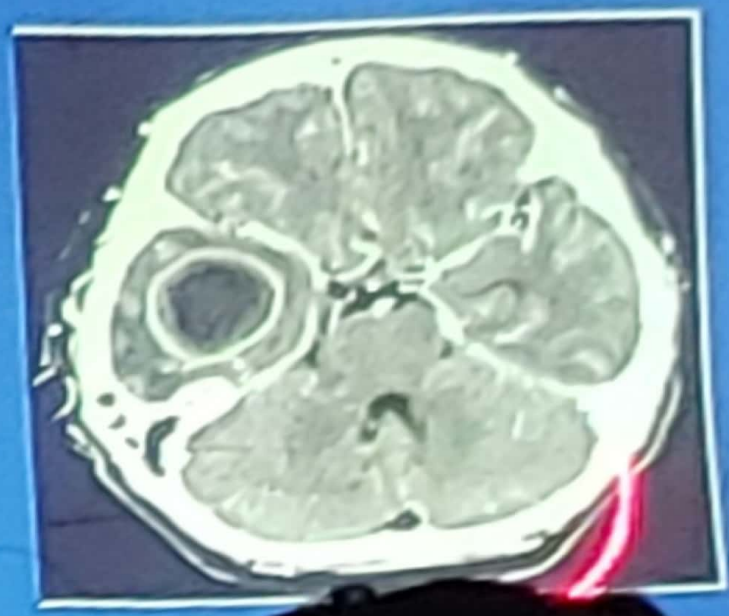


الممسوحة ضوئيا بـ CamScanner

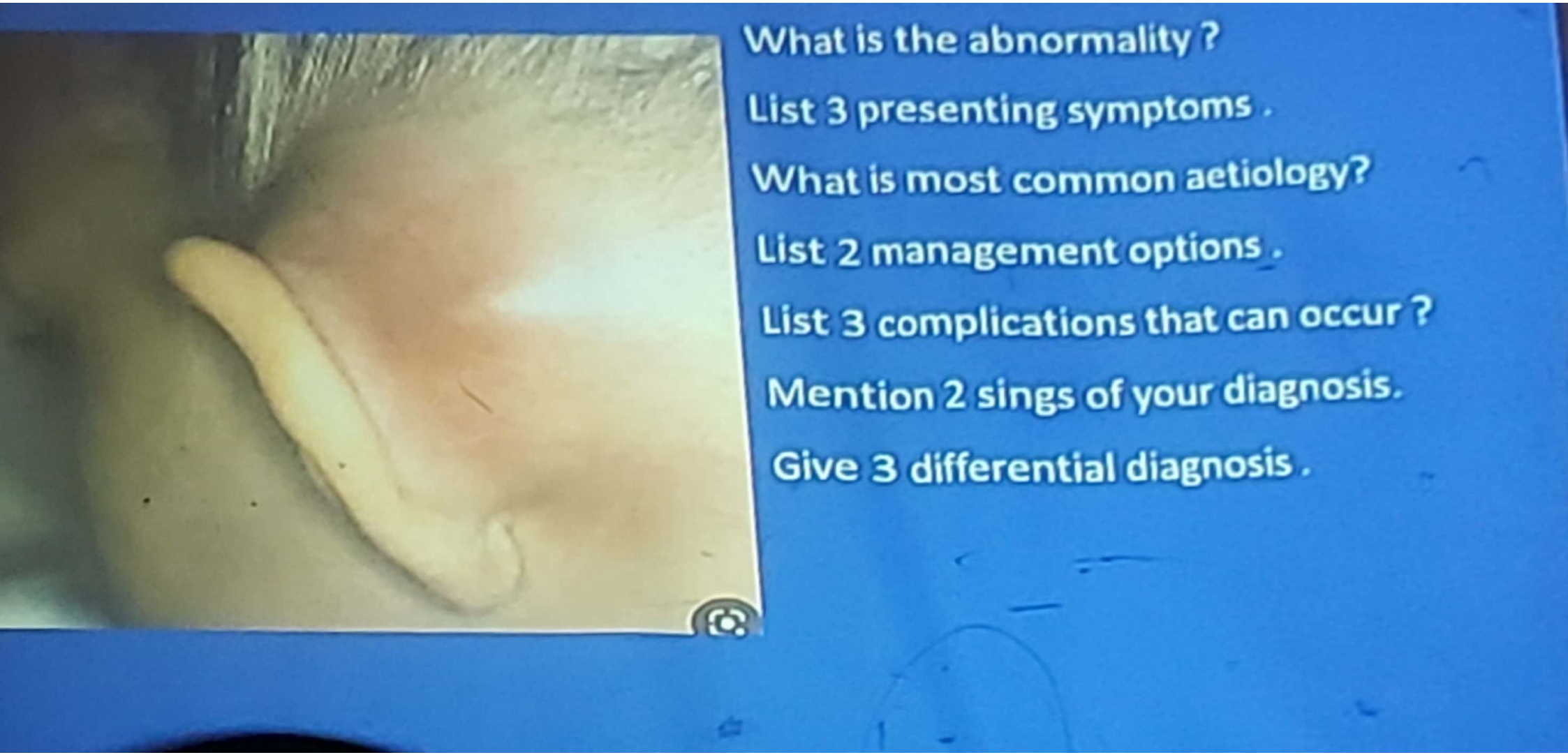


الممسوحة ضوئيا بـ CamScanner

- What is this study&
- diagnosis?
- Name this sign in the study.
- List stages of this condition



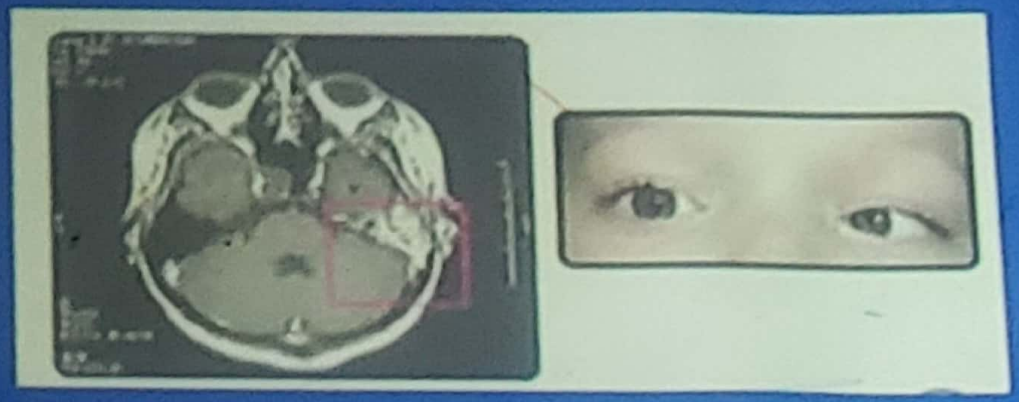
الممسوحة ضوئيا بـ CamScanner



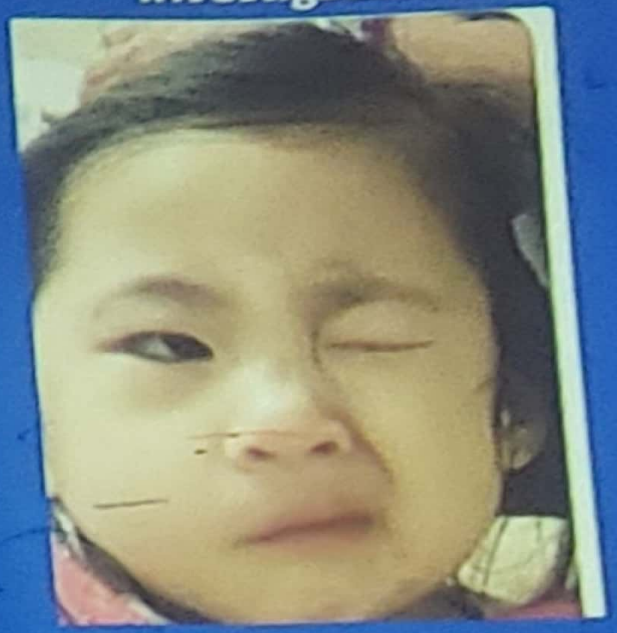
الممسوحة ضوئيا بـ CamScanner

History of ear discharge

Name the tried of this condition



The most common cause & investigations& treatment



الممسوحة ضوئيا بـ CamScanner

History of ear discharge

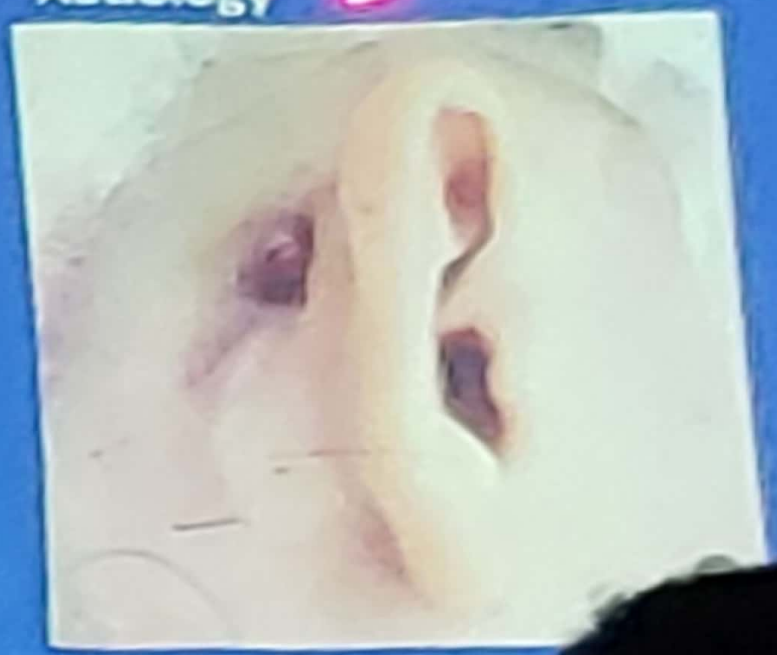
Name the sign

Complications

Differential diagnosis

Diagnosis

Aetiology



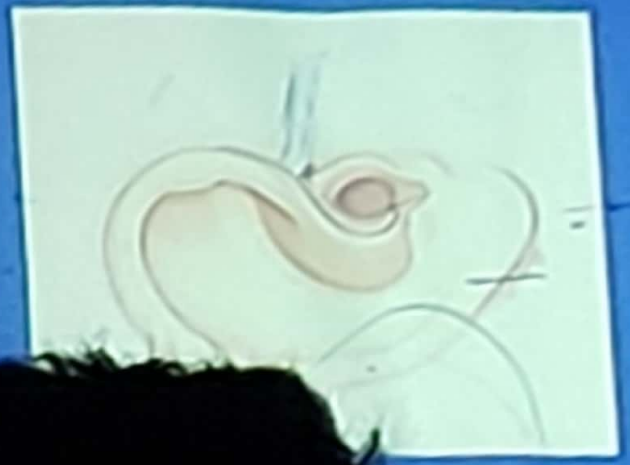
الممسوحة ضوئيا بـ CamScanner

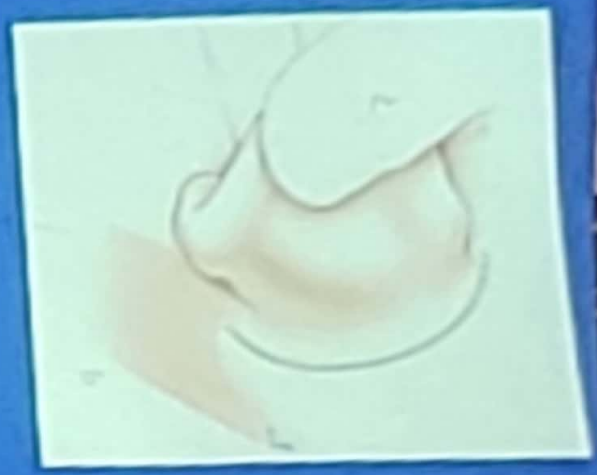
Types of mastoidectomies?

Types of canal wall down (open) technique?

Indications of tympanoplasty?2C 2T

A approaches of middle ear surgery?





الممسوحة ضوئيا بـ CamScanner

Facial nerve paralysis

- Aetiology.
- Idiopathic (Bells palsy)
- Trauma- surgical (ear ,parotid) & accidental (TB#)
- Inflammatory
- (A.O.M\ C.S.O.M\ herpes zoster RHS)
- Tumors
- ***General management of FNP?***

الممسوحة ضوئيا بـ CamScanner

- History of sudden facial weakness , after sudden mild ear pain (mastoid area)no rash , ear examination normal , investigation was normal , no history of trauma.

- What is your diagnosis?
- Give 3 theories for this condition.
- Outline the management .
- List 3 causes poor prognosis in this case.
- Give 2 difference between UMNL&LMNL

الممسوحة ضوئيا بـ CamScanner

Describe the findings

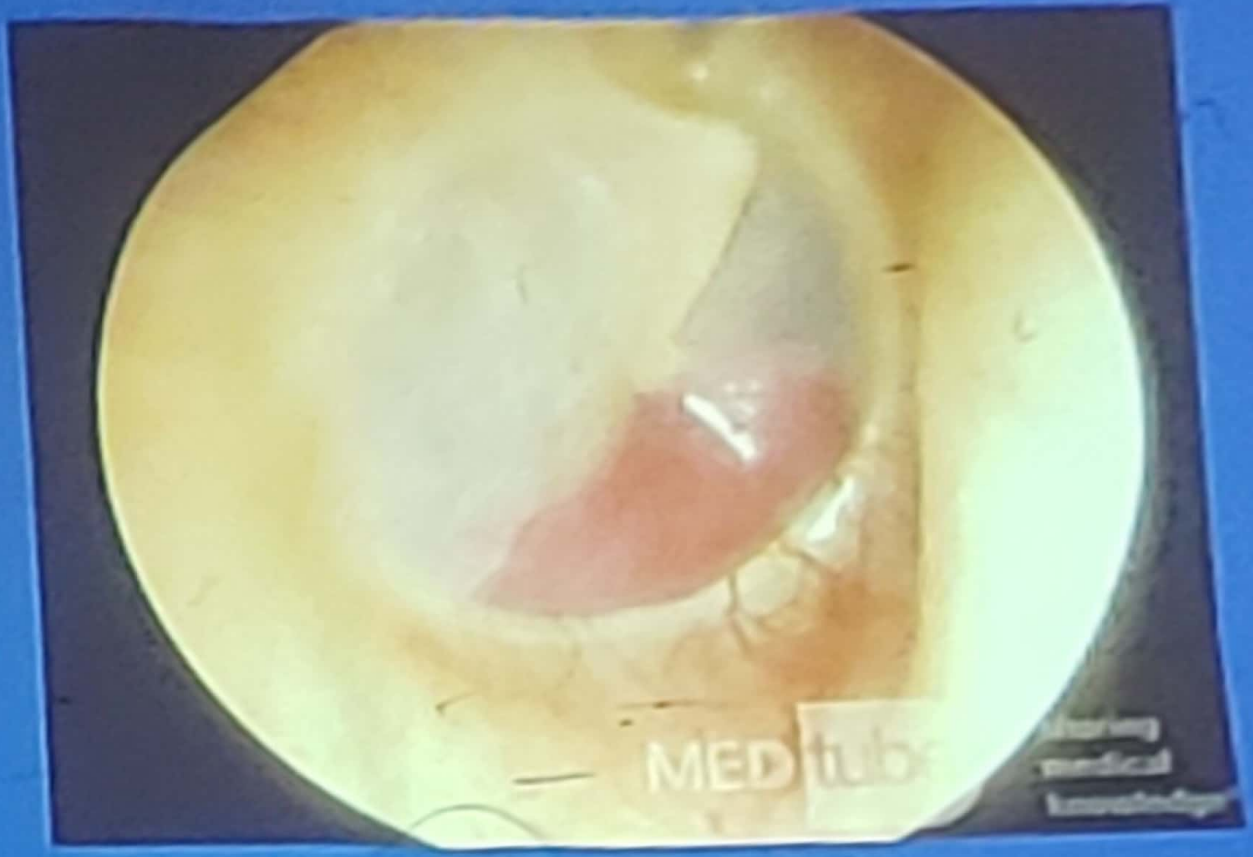
List 2 presenting symptoms.

List 2 signs for your diagnosis.

List 3 investigations

List 2 management strategies

What is the contraindication in this case?



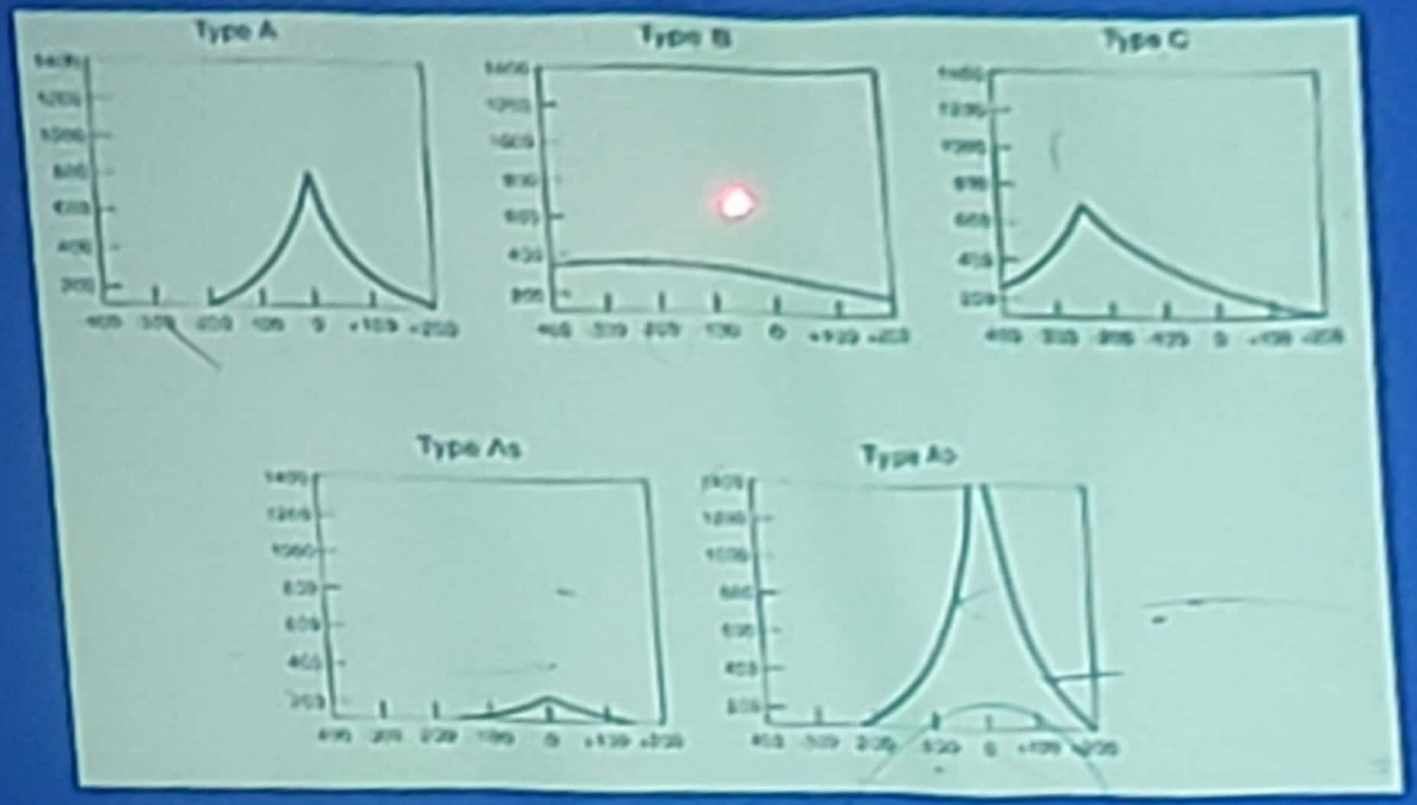
الممسوحة ضوئيا بـ CamScanner

Brown`s sign :tumor may blanch with positive pressure on pneumotoscopy(signalization)

Aquino`s sign cessation of tumor pulsation with ipsilateral carotid artery compression

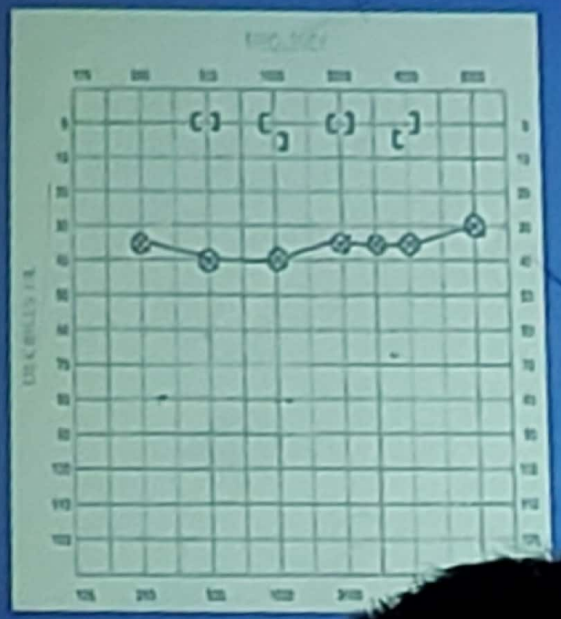
الممسوحة ضوئيا بـ CamScanner

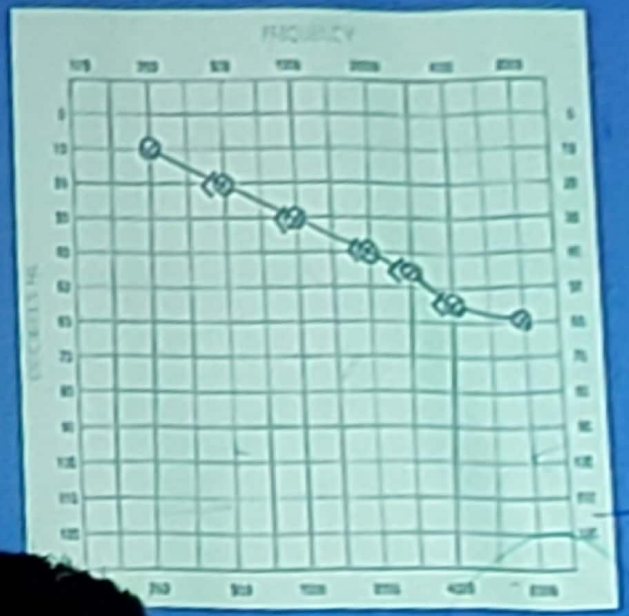
Tympanogram

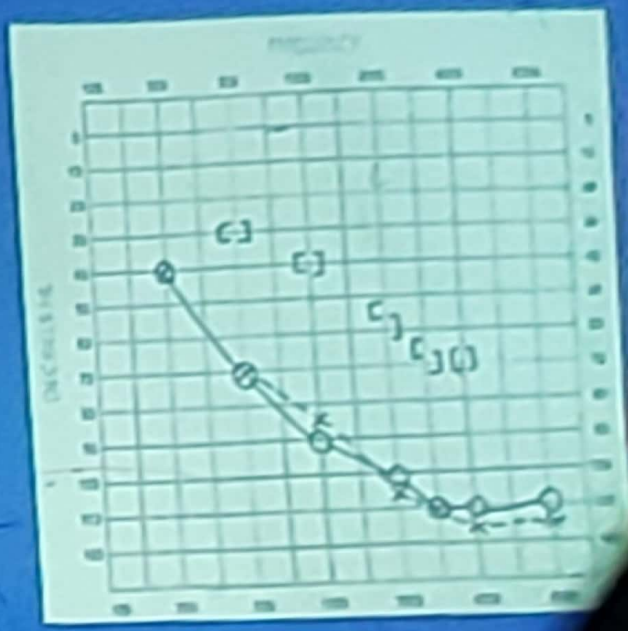


الممسوحة ضوئيا بـ CamScanner

What is this
3 differential diagnosis



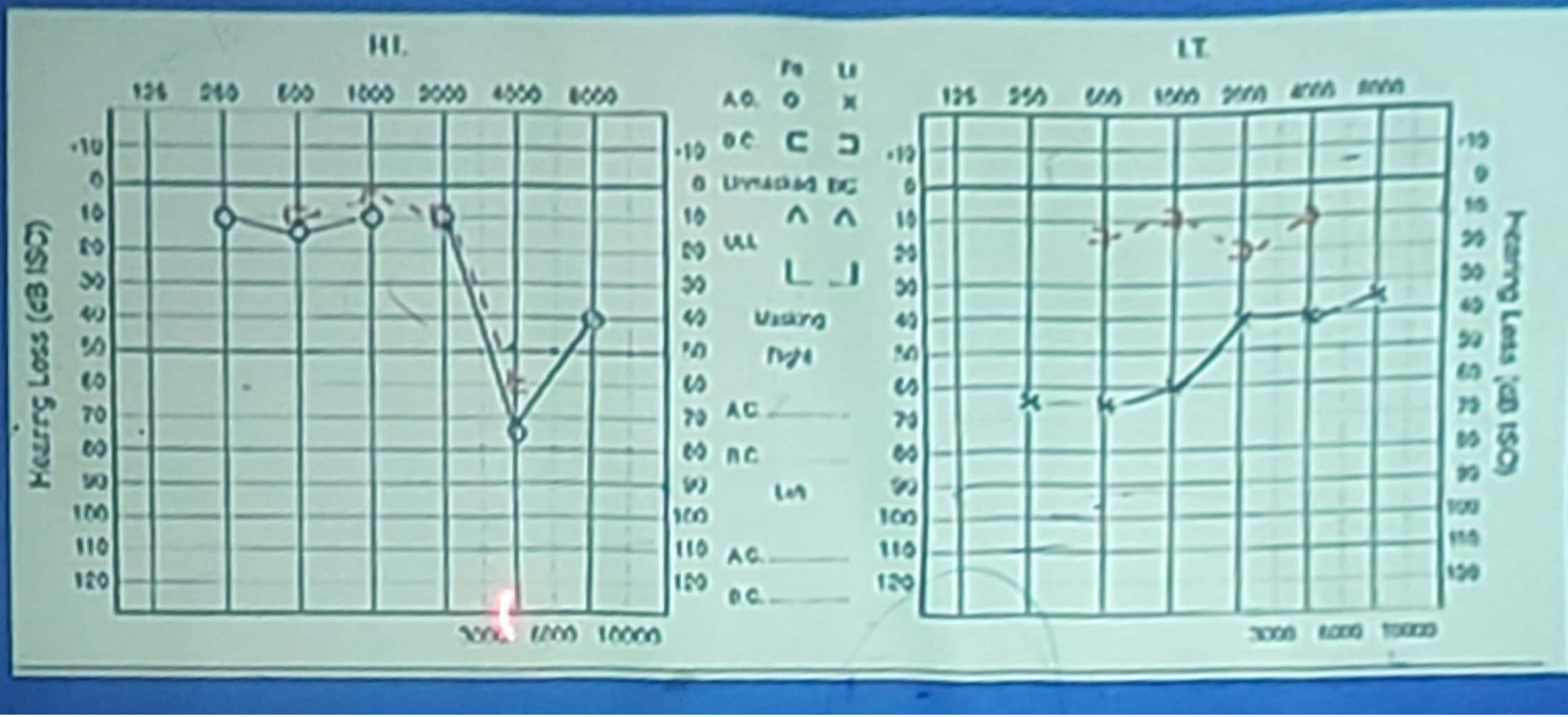




الممسوحة ضوئيا بـ CamScanner

Diagnosis

2D.D



الممسوحة ضوئيا بـ CamScanner

Battle's sign

الممسوحة ضوئيا بـ CamScanner